

THE CRIME VICTIMS' CENTER  
\_\_\_\_\_  
Of Fayette County\_\_\_\_\_  
6 Oliver Road, Suite 108, Oliver Square Plaza, Uniontown, PA 15401  
OFFICE (724) 438 1470 FAX (724) 437 6097  
HOTLINE (724) 437 3737  
E-mail: [cvc@crimevictimscenter.com](mailto:cvc@crimevictimscenter.com)

**2018-2019**  
**Truancy Elimination Program Referral**

DATE: \_\_\_\_\_  
STUDENT'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ DOB: \_\_\_\_\_ RACE: \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_

ACCURATE ADDRESS: \_\_\_\_\_ GENDER: \_\_\_\_\_

ACCURATE PHONE: \_\_\_\_\_

SCHOOL ATTENDING: \_\_\_\_\_ GRADE: \_\_\_\_\_

SCHOOL DISTRICT: \_\_\_\_\_

ATTENDANCE OFFICER: \_\_\_\_\_

DISTRICT JUSTICE MAGISTRATE: \_\_\_\_\_

OTHER PEOPLE LIVING IN THE HOME	DOB	AGE	SCHOOL	GRADE
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**PLEASE ATTACH AND COMPLETE THE FOLLOWING:**

- ☐ CURRENT ATTENDANCE RECORDS
- ☐ CURRENT GRADES
- ☐ DATES/TIMES OF ANY CURRENTLY SCHEDULED HEARINGS OR MEETINGS
- ☐ COPIES OF SCHOOL CITATIONS
- ☐ COPY OF SCHOOL'S FIRST LETTER ATTEMPT TO FAMILY