



Student Referral  
2021-2022

### Student Information

School: \_\_\_\_\_

Student #: \_\_\_\_\_

Grade: \_\_\_\_\_

### Food Insecurity Indicators

(check any that apply)

#### Physical Appearance:

- ☐ Extreme thinness
- ☐ Puffy, swollen skin
- ☐ Chronically dry, cracked lips
- ☐ Chronically dry, itchy eyes
- ☐ Brittle, spoon-shaped nails

#### School Performance:

- ☐ Excessive absences or tardiness
- ☐ Repetition of a grade
- ☐ Chronic sickness, visits to the nurse
- ☐ Short attention span / inability to concentrate
- ☐ Chronic behavior (hyperactive, aggressive)

#### Home Environment:

- ☐ Moves often
- ☐ Often spends nights away from home
- ☐ Loss of income
- ☐ Family crisis
- ☐ Comments about missing meals

#### Behavior that Demonstrates Food Insecurity:

- ☐ Rushing food lines
- ☐ Noticeable hunger on Monday mornings
- ☐ Asking for second portions at school meals
- ☐ Teacher routinely brings food for student
- ☐ Generally anxious, withdrawn, distressed

#### Any Other Indicators:

### Referrer's Narrative

(a brief summary to explain referring this student)

---

---

---

---

---

\_\_\_\_\_  
Signature of Referrer

\_\_\_\_\_  
Title