

RTL B Referral Form

# Bombay Cluster

Resource Teacher : Learning and Behaviour.

**Janet Davis.**

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**Resource Teacher: Learning and Behaviour**  
**Referral Form for Group/ Class/School.**

**School -**

<b>Names <i>Ingoa Whanau</i></b>	
<b>Contact Phone Numbers</b>	<b>Teacher/s and Class Level/s</b>
<b>Referral made by</b>	

<b>Proposed Programme and Facilitators</b>
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RTL B Referral Form

Teacher/s signature/s \_\_\_\_\_ Date \_\_\_\_\_

**Privacy Act Authorisation.** I/we give authority for the RTL B to obtain and share information in the context of the referral as necessary for this pupil. (Privacy Act, 1993).

Parent/ Guardian signature/s \_\_\_\_\_ Date \_\_\_\_\_

This referral has been fully discussed and completed in collaboration with the parent/ guardian and classroom teacher.

Principal's signature \_\_\_\_\_ Date \_\_\_\_\_