** SCIP**



**Referral Submission Checklist**

* **Parent / Guardian Letter shared by school with parent / guardian**
* **Referral Form fully completed and verbal consents obtained from:**
* **School Principal**
* **School Contact Person**
* **Parent / Guardian**
* **Reason for Referral section has been completed by school**

**\*\* Please note that a Referral Form cannot be processed by SCIP without all of the above listed components.**

**\*\* Updated Referral Forms are sent out annually electronically. Please ensure you are using the most current Referral Form dated September 2021.**

**\*\* This package can be copied as required.**

**\*\* You can also access fillable referral forms through our website** <https://www.vanier.com/programs-services/school-community-intervention-partnership/>

**\*\* Please submit completed referrals to SCIP via email to** **information@scipinlondon.com**

 **or Fax 519-432-0056**

**Thank you. We look forward to working with you on this referral.**

 **Sincerely**

**The SCIP Team**

* **If you have questions about possible referral – contact SCIP for consultation via email** **information@scipinlondon.com** **or phone 519-432-0881 ext. 100**