

**CHEROKEE NATION**  
**DEPARTMENT OF JUVENILE JUSTICE**  
P.O. Box 1730, Muskogee, OK 74402  
P: 918-453-5645 • F: 918-682-2835 • truancy@cherokee.org



**Date:** \_\_\_\_\_

**NEW REFERRAL**

**REVIEW**

**ADVOCATE ONLY**

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

**School's Contact Person:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Ext:** \_\_\_\_\_

**Child's Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Grade:** \_\_\_\_\_ **IEP:**  Yes  No

**Parent/Guardian:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Parent/Guardian:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Summary of Referral**

**Unexcused absences:** \_\_\_\_\_ **Unexcused tardies:** \_\_\_\_\_

\* Attach documents showing all absences/tardies.

**Previous referrals to Cherokee Nation Court or State Court:**  Yes  No

**Comments:**

**Office Use Only**

**Advocate Assigned:** \_\_\_\_\_

**Send Notice:** \_\_\_\_\_

**Court Date:** \_\_\_\_\_