

## 4.17 Overview of External Support for a Student

<p style="text-align: center;"><b>School Name:</b> _____</p> <p style="text-align: center;"><b>Date:</b> _____</p>
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Internal School-Based team to fill in the form with student name for student currently receiving support and/or those that are the school's priority for support. This document serves to allow district and school staff to see all current supports in their building 'at-a-glance' to discuss with the external team to priorities as identified by the team.

	Student Receiving Direct Support	Student Receiving Consultation	Student Assessment Referral (In Progress/Complete)
Aboriginal Family Counsellors			
Child & Youth Mental Health			
Drug & Alcohol Counsellor			
IHCAN			
Inclusion Support Teacher			
Occupational Therapist			
Physio Therapist			
POPARD/POPFASD/POPEI			
RCMP Liaison/ NCP Liaison			
School & Family Consultant			
SET-BC			
Speech & Language Pathologist			
Other Inclusive Education Staff			
Other			
Other			
Other			