**I’RAISE**

**Girls & Boys International Corporation**



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### NYC Public School College Impact Referral Form

**SCHOOL INFORMATION**

\*School Full Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fax Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_School Website\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_

**Does Your School Currently Offer Any of the Following to Students (***circle all that apply):*

SAT Prep

Regents Prep

College Prep

College Advising

College Workshops

College Tours & Fairs

**REQUESTED SERVICES**

**How did you hear about us?**

Google­­\_\_\_\_\_\_\_\_

Social Media Site\_\_\_\_\_\_\_

Advertisement\_\_\_\_\_\_\_\_

Referral\_\_\_\_\_\_\_\_

Attended Previous Workshop\_\_\_\_\_\_\_\_\_

Other (please specify)\_\_\_\_\_\_\_\_\_

**Requested Programs & Services- *(place check mark for each program of interest)***

SAT Prep\_\_\_\_\_\_\_\_\_\_\_\_\_

Regents Prep\_\_\_\_\_\_\_\_\_\_\_\_\_

College Readiness\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Support Services\_\_\_\_\_\_\_\_\_\_\_\_\_

Group Mentoring\_\_\_\_\_\_\_\_\_\_\_\_\_

All Services\_\_\_\_\_\_\_\_\_\_\_\_\_

Other\_\_\_\_\_\_\_\_\_\_\_\_\_

**Length of Services (place check mark for requested length of service)**

One Day(5 hr) \_\_\_\_\_\_\_ Three Months \_\_\_\_\_\_\_ Nine Months \_\_\_\_\_\_\_

**Days and times of Services Requested (not including one day):**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***Ie:Monday*** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
| ***8am-9am*** |  |  |  |  |  |  |

**Any Special Accommodations or Special Request please state here**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***\*Indicates Required Field***

**Please email completed form to** **admin@iraiseinc.org**

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**OFFICAL USE ONLY**

Supervisory Review­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_

Approved: YES NO Date\_\_\_\_\_\_\_\_\_\_ Assigned to \_\_\_\_\_\_\_\_\_\_\_\_