

Student Referral for Participation

Zaagaaté Mentoring Program

2800 S. Shepherd Rd., Mt. Peasant, MI 48858

Phone: 989.775.4850

Fax: 989.775.4851



Student Name: _____

Gender: _____ Date of Birth: _____ Date: _____

Student Information

Home Address: Street: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Age: _____ Grade: _____ Tribal Affiliation: _____

Parent/Guardian Information

Parent/Guardian Name: _____ Work Phone: _____

Address: _____ Cell Phone: _____

(If different from student)

Referral Source (Check)

M.P. Middle School

Fancher

Renaissance PSA

Mary McGuire

Shepherd Schools

Saginaw Chippewa Academy

Other: _____

Teacher Name: _____ Phone/Email: _____

Name of Person: _____
Making Referral: _____ Phone/Email: _____