



Request for Non-crisis OSFSE Services

Office of Student and Family Support and Engagement
MONTGOMERY COUNTY PUBLIC SCHOOLS (MCPS)
Rockville, Maryland 20850

MCPS Form 551-1
August 2018

PART I: To be completed and submitted to the Office of Student and Family Support and Engagement (OSFSE), Carver Educational Services Center (CESC), Room 50. Please submit two weeks in advance for best scheduling.

Name _____ Date Submitted ____/____/____

School/Office _____ Telephone Number ____-____-____

Address _____

E-mail Address _____

Type of request: Meeting Committee/Workgroup Event

Describe Request (date and time, type of support or participation, number of staff members, one time or ongoing basis):

Person Requesting Service Signature _____ Date ____/____/____

Administrator for Requesting Office Signature _____ Date ____/____/____

PART II: To be completed by the Office of Student and Family Support and Engagement

Request No. _____ Date Received ____/____/____

Request Reviewed: In Person Telephone E-mail Letter

By _____

Assigned to: Health and Wellness Psychological Services
 International Admissions and Enrollment Restorative Justice
 Pupil Personnel and Attendance Services School and Family Services
 School Counseling Services Other _____
 Student Leadership

Comments:

Recommendation:

Program Leadership's Signature _____ Date ____/____/____

For Associate Superintendent's Use Only

Approved No Approved

Signature _____ Date ____/____/____