

Referral Form

Psychological Testing and Evaluation (PTE)

Note: Prior to administering a battery of tests, the Psychologist or Licensed Psycho Educational Specialist (LPES) must consider historical clinical information, identify specific referral questions to be addressed by the evaluation, and determine that the clinical questions cannot be addressed through a diagnostic interview with a skilled clinician.

Required Info for PTE Referral	Please include required information specific to each row within this column.
Student Name:	
Student Medicaid #:	
Name of School:	
Date of most recent Diagnostic Assessment (DA) or medical, psychiatric, and educational evaluation (relevant to the referral):	
Diagnosis Code (if available):	
Reason for Referral:	
Date of referral:	
Name of Referring Staff (print):	
Title of Referring Staff:	
Signature of Referring Staff	