



SEPA
SCHOOL ENROLLMENT PLACEMENT
& ASSESSMENT CENTER



SEPA Panorama Site
8015 Van Nuys Blvd.
Panorama City, CA 91402
(818) 909-4593

SEPA Placentia Site
1339 Angelina St.
Los Angeles, CA 90026
(213) 482-3954

Date: _____ Name of Student: _____ D.O.B: _____

School: _____ Grade: _____

Address: _____ City: _____ Zip Code: _____

Parent/guardian name (if minor): _____ Parent #: _____

Student Phone Number: _____

Student Language: English Spanish Other _____

Home Language: English Spanish Other _____

Referral is for: Enrollment Vaccines Basic needs Other _____

Name of person submitting referral: _____ Title: _____

School/Office: _____ Phone #: _____

Has student been notified of referral? Yes No Has parent been notified of referral? Yes No

Case Notes (Please provide a little history on the case): _____

Office use only	
Referral Received Date: _____	Received By: _____
Parent contact Date: _____	Student Contact Date: _____
Services Requested: <input type="checkbox"/> Enrollment <input type="checkbox"/> Vaccines <input type="checkbox"/> Basic needs <input type="checkbox"/> Other _____	
Services Provided/Follow-up needed: _____	