



SACRAMENTO CITY UNIFIED SCHOOL DISTRICT
Kev Qhia Tawm thaum Pom tias Muaj Kev Ua Phem Saib Tsis Taus

HNUB TIM: _____

Cov Lus Qhia: Ua kom tiav daim ntawv no los qhia yog tias muaj kev ua phem saib tsis taus. Yuav muaj kev tshawb xyuas los txiav txim yog hais tias muaj kev ua phem saib tsis taus tshwm sim thiab txawm hais tias yuav muaj thiab tsis muaj kev txhim kho raws li xav tau.

Hnub teebmeem tshwm sim: _____	Tsev Kawm Ntawv Npe: _____
Tus Tub/Ntxhais Raug Teebmeem Npe: _____	Qib Kawm: _____
Tus Tub/Ntxhais Tsim Teebmeem Npe: _____	Qib Kawm: _____
Tus neeg sau daim Form no: _____	Lub meej mom: _____
Kos Npe: _____	Xovtooj: _____

Hom Kev Ua Phem Saib Tsis Taus				
<input type="checkbox"/> Ua Phem Saib Tsis Taus /Raws li seb yog Pojniam thiab Txivneeg	<input type="checkbox"/> Hom Neeg lossis Haiv NNeeg	<input type="checkbox"/> Muaj kev xav tau tshwj xeeb lossis xiam oob qhab	<input type="checkbox"/> Kev Ntseeg	<input type="checkbox"/> Lwm Yam

Tshwm Sim Nyob rau Qhov Twg (xaiv tag nrho cov uas cuam tshuam)		
<input type="checkbox"/> Chav kawm	<input type="checkbox"/> Chav dej	<input type="checkbox"/> Tawm ntawm tsev kawm thaj chaw
<input type="checkbox"/> Hallway	<input type="checkbox"/> Chaw uasi/tiaj tshav puam	<input type="checkbox"/> Sau ntawv Email/text/computer
<input type="checkbox"/> Chav noj sus	<input type="checkbox"/> Field trip/activity/event	<input type="checkbox"/> Lwm yam: _____

Pes Tsawg Zaus
<input type="checkbox"/> Ib zaug <input type="checkbox"/> Tas mus li lossis rov ua li qub tsis tu ncu

Thov piav qhia qhov teebmeem kom ntxaws ntxiv? (Thov muab ib daim ntawv tom uake nrog daim no yog xav tau chaw sau ntxiv)



SACRAMENTO CITY UNIFIED SCHOOL DISTRICT
Kev Soj Ntsuam Ntawm Kev Tshawb Fawb Ua Saib Tsis Taus
(Ua om Tiav los ntawm Tus Thawj Tswj)

Qhia me ntsis txog txhua yam uas nrhiav tau thiab kev daws teebmeem. (Thov siv ib daim ntawv los tom nrog daim no ntxiv yog tias tsis txaus; nrog rau cov lus hais)

Puas yog qhov teebmeem no daws tiav nyob rau ntawm lub tsev kawm ntawv? **Yog** **Tsis Yog**

Cov kev txhawb pab / Counseling Cov kev pabcuam

Lub chaw Connect Center Kev pab ntawm tsev kawm ntawv Koom haum sab nrauv

Lub chaw txhawb pab tub/ntxhais kawm ntawv Leej twg _____ Qhov twg _____

Tus Neeg Qhia Txog Qhov Kev Ua Saib Tsis Taus No (tej zaum kuj yuav tsis yog tus neeg sau daim form no)

Npe: _____ Xovtooj: _____ Lub meej mom: _____

Tus thawj tswj ua qhov kev soj ntsuam no

Kos Npe:	Hnub Tim:
----------	-----------