



The following link will provide the necessary contact information to your local TEIS office

<http://www.state.tn.us/education/teis/doc/TEISdistrictmap6-8-10.pdf>

You may also contact TEIS at 1-800-852-7157.

Date of referral to TEIS: Social Security Number (if known)

Name of child *(including middle name)*: Date of Birth:

Name of Referent: Phone No:

E-Mail Address:

Name of Team Leader: Phone No:

Initial Concerns:

Have parental rights been terminated? Yes No

Name of Biological Parents/Legal Guardian:

Mother: Address:

Mother's Phone No: Alternate number *(if applicable)*:

Email *(if applicable)*:

Father: Address:

Father's Phone No: Alternate number *(if applicable)*:

Email *(if applicable)*:

Guardian: Address:

Guardian's Phone No: Alternate number *(if applicable)*:

Email *(if applicable)*:

How best to reach Biological Parents/Legal Guardian:

Name of Foster Parent(s) (if applicable):

Address:

Foster Parent(s) Phone No: Alternate number *(if applicable)*:

Email *(if applicable)*:

How best to reach Foster Parents:

If the Foster Parent is a relative of the child, please elaborate:



Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.

