

**Student Name:** 



## **Mental Health Therapy Referral**

Referral to: Kati Schneider, LISW, UCS Therapist embedded at Tippie College of Business

If you have a student you are concerned about, please gather the following information, and submit this form or information via e-mail to Kati @ <a href="mailto:kati.organ">kati-schneider@uiowa.edu</a>. Please note that this is not emergency/crisis care, if you have a student in imminent danger please refer to <a href="Quick Guide for Helping">Quick Guide for Helping</a> Students - Office of the Dean of Students | The University of Iowa (uiowa.edu)

Hawk ID:

Brief explanation of concerns: (academic, behaviors, relationships, safety, etc.)		
Ask for verbal consent from the student to make referral:	: (I do not make cold calls to students)	
Yes		
Is the student enrolled in Tippie College of Business? Yes	es	
Do they have a Therapist in the Community they already see? Yes		
Faculty/Staff submitting referral:	Date:	