



**RHODE ISLAND COLLEGE**

PAUL V. SHERLOCK CENTER  
ON DISABILITIES

**Submitting a Referral  
To  
Rhode Island Vision Education and Services Program  
(RIVESP)**

We at RIVESP are striving to make our referral process as smooth as possible. As a result, we have made some changes that we hope will do just that. We are also ending our practice of district representatives.

Please follow the steps outlined below when submitting a referral.

1. Obtain a referral form by downloading it from the Paul V. Sherlock Center on Disabilities website located at [www.sherlockcenter.org](http://www.sherlockcenter.org).
2. Complete the form and include all necessary documentation
3. Send the completed packet to:

Kathy Greenwell  
Paul V. Sherlock Center on Disabilities  
Rhode Island College  
600 Mount Pleasant Avenue  
Providence, Rhode Island 02908 **or**

4. Hand the completed packet to a RIVESP service provider (Teacher of the Visually Impaired or Orientation and Mobility Specialist) who is working in your district.



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## Referral for Services

Referral Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Student Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

School: \_\_\_\_\_ Phone: \_\_\_\_\_

Case manager: \_\_\_\_\_ Preferred contact: \_\_\_\_\_

District Authorizing Agent: \_\_\_\_\_

Preferred contact: \_\_\_\_\_  
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Has student/family been referred to Rhode Island Services for the Blind and  
Visually Impaired? \_\_\_\_yes \_\_\_\_no \_\_\_\_not sure  
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### Checklist of Items to be included in the referral packet:

1. Reason for Referral (please check)
  - Functional Vision Assessment     TVI services
  - O&M Assessment                     O&M services
  - Learning Media Assessment
2.  Consent to Evaluate
3.  Eye Report from Ophthalmologist (required)
4.  Eye Report from Optometrist
5.  Guardian Release
5.  Current IEP
6.  Medical Reports
7.  Other reports (OT, PT, etc)

**\*\*please feel free to add any additional information**

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Date received \_\_\_\_/\_\_\_\_/\_\_\_\_ by: \_\_\_\_\_