touchstone
health services
partnering with families

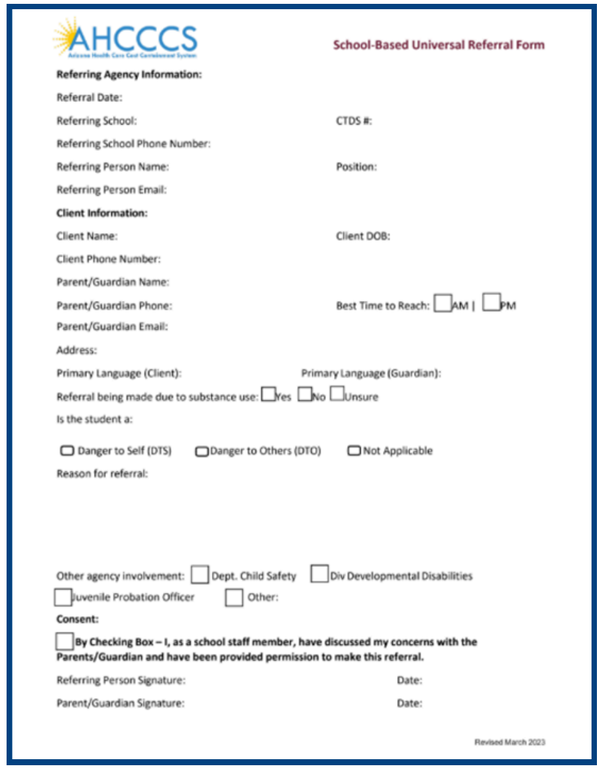
Partner School Referral Tutorial

Referral Form

This referral form is the only referral form currently in use. Please go to the Touchstone website school partner information hub to download the updated form. The PDF is now fully fillable, including e-signatures.
**Please follow district policy for e-sign or physical signature needs.*

Form Access:
https://www.touchstonehs.org/school-partner-information-hub

Password: THSschools2026!!

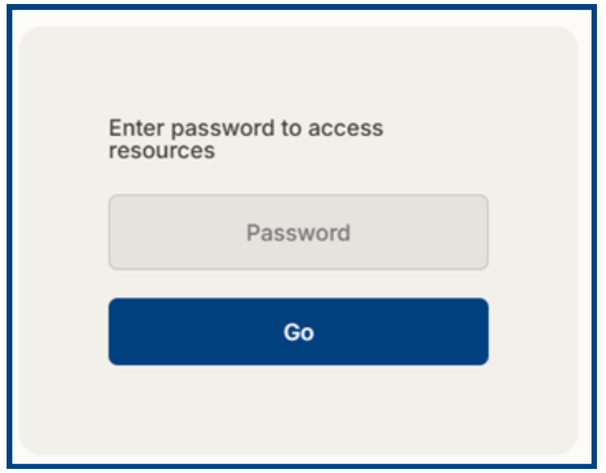

AHCCCS
Arizona Health Care Cost Containment System

School-Based Universal Referral Form

Referring Agency Information:
Referral Date:
Referring School: CTDS #:
Referring School Phone Number:
Referring Person Name: Position:
Referring Person Email:
Client Information:
Client Name: Client DOB:
Client Phone Number:
Parent/Guardian Name:
Parent/Guardian Phone: Best Time to Reach: ☐ AM | ☐ PM
Parent/Guardian Email:
Address:
Primary Language (Client): Primary Language (Guardian):
Referral being made due to substance use: ☐ Yes ☐ No ☐ Unsure
Is the student a:
☐ Danger to Self (DTS) ☐ Danger to Others (DTO) ☐ Not Applicable
Reason for referral:

Other agency involvement: ☐ Dept. Child Safety ☐ Div Developmental Disabilities
☐ Juvenile Probation Officer ☐ Other:
Consent:
☐ **By Checking Box – I, as a school staff member, have discussed my concerns with the Parents/Guardian and have been provided permission to make this referral.**
Referring Person Signature: Date:
Parent/Guardian Signature: Date:

Revised March 2023



Submission

ALL referral forms must be submitted through the website

- We will not accept referrals through email

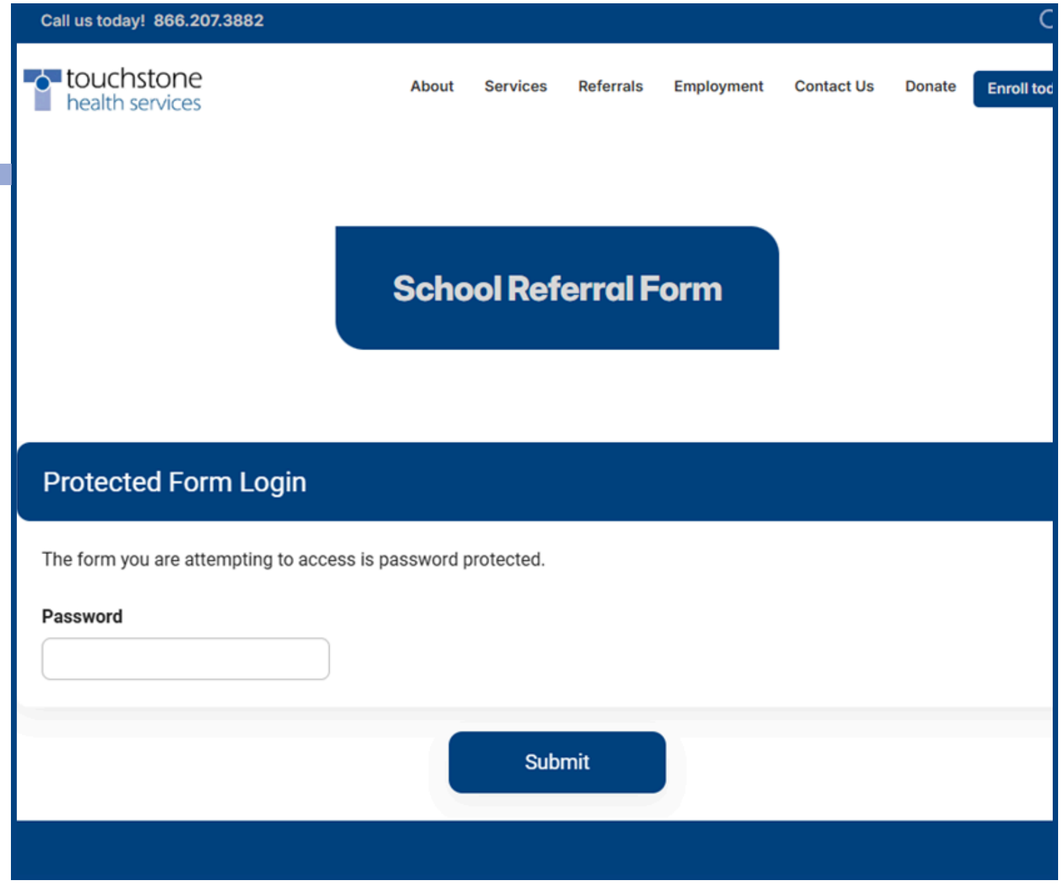
Head to: https://www.touchstonehs.org/school-referral/
Once you are on this website, you should see a field to enter the password to open the referral submission form: THSschools2026!!

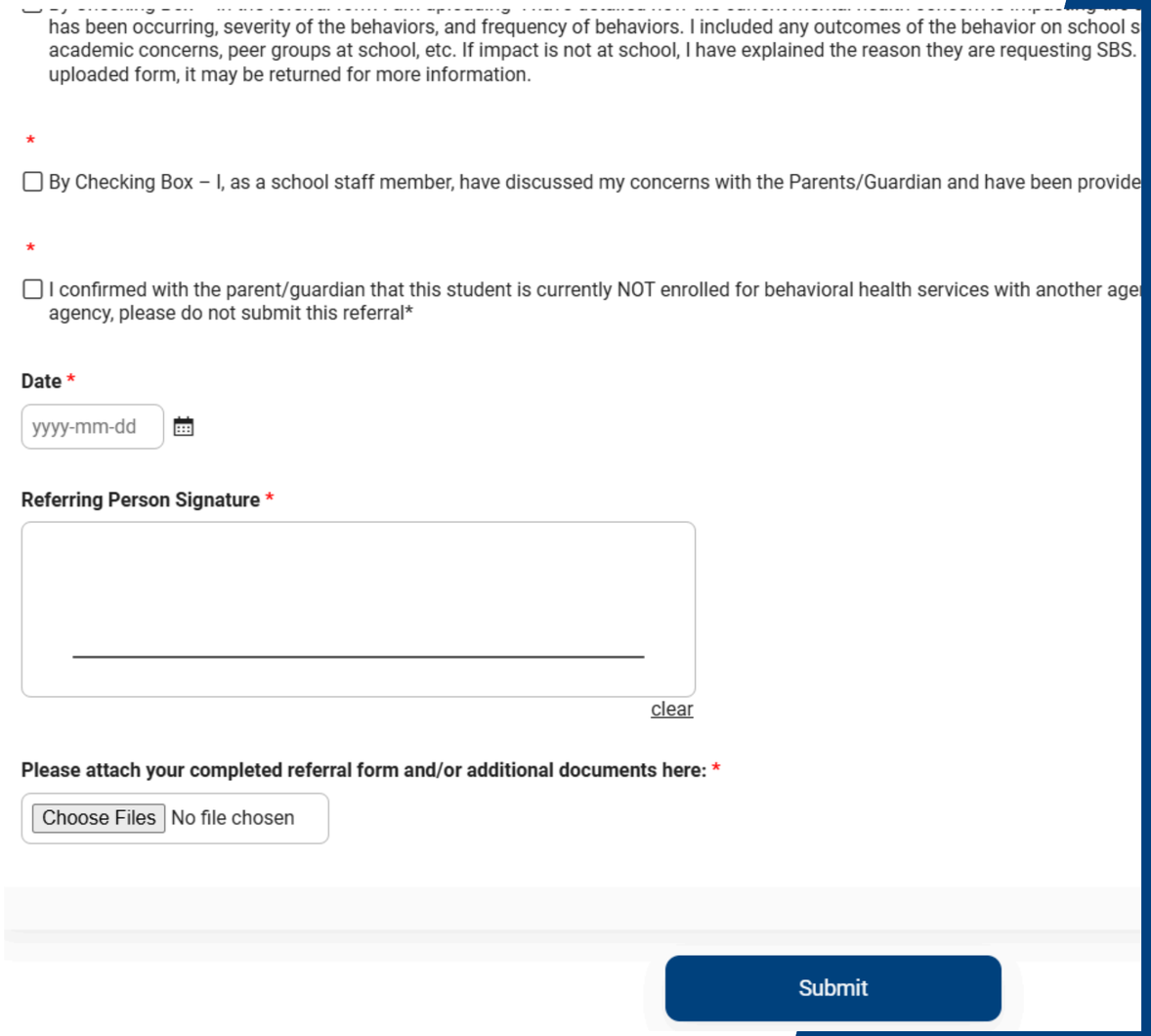
To submit a referral, fill out the required fields and upload the paper or filled PDF form with all areas completed, including your signature and the parent/guardian signature.

- You MUST have the parent/guardian sign below your signature on the form to refer to THS.

Referral Form Access

Password:
THSschools2026!!





Upload Form

This is what you will see at the bottom of the form, where you will upload and attest that you completed the uploaded form fully. Fill out ALL fields, upload the paper/PDF form that you and the parent(s)/ guardian(s) signed and scanned or completed as a fillable form with e-signatures, and hit submit!

Questions or Concerns?

For any questions or concerns, reach out to:
Communications@touchstonebh.org

Thank you!

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