Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time:\_\_\_\_\_\_\_\_\_\_\_\_

Grade Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referring Staff:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Data Collection Only

Need Assistance from the Office

Student in in problem solving or has an IEP (BIP)

 **(Circle as needed)**

Location of Incident: (Circle as needed)

Hallway Cafeteria

Class Special Event

Bus Art/Music/Gym

Library Office

Cafeteria Field Trip

Playground Computer Lab

* Class
* Bus
* Library
* Cafeteria
* Playground

|  |  |  |  |
| --- | --- | --- | --- |
| Problem Behavior**Minor** | Problem Behavior**Major** | Possible Motivation  | Action TakerBy Referring TeacherAnd/or Admin Team(Circle one to Document) |
| * Disruption
 | * Cheating/Lying
 | * Obtain Peer Attention
 | * Student Conference
 |
| * Disrespect
 | * Extreme Disruption
 | * Obtain Adult Attention
 | * Explanation of Rules
 |
| * Noncompliance
 | * Extreme Disrespect
 | * Obtain Items/

Activities | * Verbal Warning
 |
| * Bully Behavior
 | * Abusive Language/Profanity
 | * Avoid Peers
 | * Parent Contact
 |
| * Physical Contact
 | * Forgery
 | * Avoid Adults
 | * Parent Call

Date:Time: |
| * Information & Other Electronics/Tech Violation
 | * Bomb Threat/False Alarm/Arson
 | * Avoid Task/

Activity | * Parent Conference
 |
| * Inappropriate Language
 | * Use/Possession/making of weapon/combustible item
 | * **Others Involved**
 | * Written Report to Parents
 |
| * Property Misuse
 | * Use/Possession of Drug/Alcohol/Tobacco
 | * Peer(s)
 | * Email

Date: |
|  | * Theft
 | * Teacher
 | * Revoked Privilege
 |
|  | * Property Damage/Vandalism
 | * Staff
 | * Restitution
 |
|  | * Out of bounds/off school location
 | * Substitute
 | * Loss of Privilege
 |
|  | * Harassment/Bulling
 | * Other(s)
 | * Time out
 |
|  | * Inappropriate display of affection
 | * Unknown
 | * Time out in office
 |
|  | * Electronics/tech violation
 |  | * Individualized instruction
 |
|  | * Fighting
 |  | * Administration Action
 |
|  | * Aggressive Physical Contact
 |  | * Lunch Detention
 |
|  | * Bully Behavior (Consistent)
 |  | * In-School Suspension

Dates: |
|  | * Information & other Electronics/tech violation
 |  | * Out of School Suspension

Dates: |
|  | * Inappropriate Language
 |  | * Bus Suspension
 |
|  | * Property Misuse
 |  | * Expulsion
 |
|  | * Has 3 minors **(teacher keeps track of this, the reports**)
 |  | * Other:
 |

Brief description of Infration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Staff Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

C: Classroom Teacher if filled out any other staff member,

C: Principal \*\*\***ONLY REFER ONE STUDENT PER REFERRAL FORM**