

Bottineau Jr/Sr High School

Discipline Referral

Student(s) _____ Referring Staff _____ Grade Level ____ Date _____ Time ____

Location

- | | | | |
|--|--|---|--------------------------------------|
| <input type="checkbox"/> Classroom | <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Bus loading zone | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Playground | <input type="checkbox"/> Bathroom/restroom | <input type="checkbox"/> Parking lot | |
| <input type="checkbox"/> Commons/common area | <input type="checkbox"/> Gym | <input type="checkbox"/> On bus | |
| <input type="checkbox"/> Hallway/ breezeway | <input type="checkbox"/> Library | <input type="checkbox"/> Special event/assembly/ field trip | |

Problem Behaviors (check the most intrusive)

MINOR

- Inappropriate lang.
- Physical contact
- Defiance/disrespect/ non-compliance
- Disruption
- Dress Code
- Technology violation
- Property misuse
- Tardy
- Other _____

MAJOR

- Abusive lang./ inapprop. lang
- Fighting/ physical aggression
- Defiance/disrespect/insubordination/non-compliant
- Harassment/ tease/ taunt
- Disruption
- Inappropriate Display of Affection
- Technology Violation
- Tardy

- Skip class/ truancy
- Vandalism
- Forgery/ theft
- Property damage
- Dress code violation
- Bomb threat
- Lying/cheating
- Arson
- Tobacco
- Weapons
- Alcohol/drugs
- Other _____
- Combustibles
- Off School Location

Possible Motivation

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Obtain peer attention | <input type="checkbox"/> Avoid tasks/activities | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> Obtain adult attention | <input type="checkbox"/> Avoid peer(s) | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Obtain items/ activities | <input type="checkbox"/> Avoid adult(s) | |

Others Involved

- None Peers Staff Teacher Substitute Unknown Other _____

Administrative Decision

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Time in office | <input type="checkbox"/> Detention | <input type="checkbox"/> Saturday School | <input type="checkbox"/> In-school suspension |
| <input type="checkbox"/> Loss of privilege | <input type="checkbox"/> Parent contact | <input type="checkbox"/> Individualized instruction | <input type="checkbox"/> Out-of-school suspension |
| <input type="checkbox"/> Conference with student | <input type="checkbox"/> Other _____ | | |

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Comments: