

Example A

SWIS™ OFFICE DISCIPLINE REFERRAL FORM

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"/> Bus | |
| <input type="checkbox"/> Hallway/ breezeway | <input type="checkbox"/> Library | <input type="checkbox"/> Special event/assembly/ field trip | |

Problem Behaviors (check the most intrusive)

- | | | | |
|--------------------------------------------------------------|-----------------------------------------------------------------------------|-----------------------------------------------|------------------------------------------|
| <input type="checkbox"/> MINOR | <input type="checkbox"/> MAJOR | <input type="checkbox"/> Skip class/ truancy | <input type="checkbox"/> Vandalism |
| <input type="checkbox"/> Inappropriate lang. | <input type="checkbox"/> Abusive lang./inapprop. lang | <input type="checkbox"/> Forgery/ theft | <input type="checkbox"/> Property damage |
| <input type="checkbox"/> Physical contact | <input type="checkbox"/> Fighting/physical aggression | <input type="checkbox"/> Dress code violation | <input type="checkbox"/> Bomb threat |
| <input type="checkbox"/> Defiance/disrespect/ non-compliance | <input type="checkbox"/> Defiance/disrespect/ insubordination/non-compliant | <input type="checkbox"/> Lying/cheating | <input type="checkbox"/> Arson |
| <input type="checkbox"/> Disruption | <input type="checkbox"/> Harassment/bullying | <input type="checkbox"/> Tobacco | <input type="checkbox"/> Weapons |
| <input type="checkbox"/> Property misuse | <input type="checkbox"/> Disruption | <input type="checkbox"/> Alcohol/drugs | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Tardy | <input type="checkbox"/> Combustibles | |

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"/> Bus Suspension | Restitution | <input type="checkbox"/> Other _____ |

Comments:

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