

Example B

Office Referral Form

Name: _____ **Location**
Date: _____ **Time:** _____ Playground Library
Teacher: _____ Cafeteria Bathroom
Grade: K 1 2 3 4 5 6 7 8 Hallway Bus
Referring Staff: _____ Classroom Other _____

Problem Behavior	Possible Motivation	Administrative Decision
Minor <input type="checkbox"/> Inappropriate language <input type="checkbox"/> Physical contact <input type="checkbox"/> Defiance <input type="checkbox"/> Disruption <input type="checkbox"/> Property misuse <input type="checkbox"/> Other _____	<input type="checkbox"/> Obtain peer attention <input type="checkbox"/> Obtain adult attention <input type="checkbox"/> Obtain items/activities <input type="checkbox"/> Avoid Peer(s) <input type="checkbox"/> Avoid Adult <input type="checkbox"/> Avoid task or activity <input type="checkbox"/> Don't know <input type="checkbox"/> Other _____	<input type="checkbox"/> Loss of privilege <input type="checkbox"/> Time in office <input type="checkbox"/> Conference with student <input type="checkbox"/> Parent Contact <input type="checkbox"/> Individualized instruction <input type="checkbox"/> In-school suspension (____ hours/ days) <input type="checkbox"/> Out of school suspension (____ days) <input type="checkbox"/> Other _____
Major <input type="checkbox"/> Abusive language <input type="checkbox"/> Fighting/ Physical aggression <input type="checkbox"/> Overt Defiance <input type="checkbox"/> Harassment/bullying <input type="checkbox"/> Disruption Other _____		

Others involved in incident: None Peers Staff Teacher Substitute
 Unknown Other

Other comments:

I need to talk to the students' teacher I need to talk to the administrator

Parent Signature: _____ **Date:** _____

All minors are filed with classroom teacher. Three minors equal a major.
 All majors require administrative decision and parent signature.