

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:**

**Follow up comments:**