

Carlock Office Discipline Referral Form

Name: _____ **Grade:** _____ **Date:** _____

Referring Person: _____ **Time:** _____

Others involved: no one peers teacher staff substitute unknown

<u>Issue of Concern</u>	<u>Location</u>	<u>Possible Motivation</u>
Major Problem Behaviors	Classroom	Attention from peer(s)
Inappropriate Language	Playground	Attention from adult(s)
Fighting/Physical Aggression	Lunchroom	Avoid peers(s)
Harassment	Hallway	Avoid adult(s)
Threatening/bullying	Bathroom	Avoid work
Lying/cheating	Bus Area	Obtain item(s)
Vandalism	Special event	Other _____
Dress code	Gym/Music/Art/IMC	Don't know
Other _____	Other _____	

Minor Problem Behaviors

- Inappropriate Language
- Minor Disruption
- Property Misuse
- Defiance/Disrespect
- Tardy
- Other _____

Staff Comments/Narrative: _____

Consequences

- Lose recess Lose other privilege _____
- Conference In-school suspension
- Parent contacted Out-of-school suspension
- Follow up agreement

Follow up Agreement

Name: _____ **Date:** _____

1. **What rule(s) did you break?** (Circle)

Be Safe Be Respectful Be Responsible

2. **What did you want?**

- I wanted attention from others
- I wanted to be in control of the situation
- I wanted to challenge adult(s)
- I wanted to avoid doing my work
- I wanted to be sent home
- I wanted revenge
- I wanted to cause others problems because they don't like me
- I wanted _____

3. **Did you get what you wanted?** yes no

4. **What will you do differently next time?**

I will be _____ **by** _____

5. **Student signature:** _____

6. **Adult signature(s):** _____

