RULH MIDDLE SCHOOL

Discipline Referral

Student Name: Date	e:/
Grade:5678	am pm
Staff Name	<u> </u>
LOCATION	
ClassroomHallway	Cafeteria
Restroom Gym	Library
Bus Loading Zone Parking Lot	Bus
Special Event/Assembly/Field TripOther	Office
PROBLEM BEHAVIOR (Must Check only ONE)	
MINOR Behaviors—must have teacher interventions shown below _Physical Contact _Defiance/Disrespect _Disruption _Property Misuse _Inappropriate Verbal Language _Other (Specify) MAJOR BEHAVIORS TO BE SENT TO OFFICE _Use/Possession of Weapons (OFFICE) _Use/Possession of Tobacco (OFFICE) _Use/Possession of Alcohol (OFFICE) _Use/Possession of Combustible Items (OFFICE) _Use/Possession of Drugs (OFFICE) _Use/Possession of Drugs (OFFICE) _Domb Threat/False Alarm (OFFICE) _OTHER Dangerous Behavior to self or Others (Includes fighting) (OFFICE)	MAJOR BEHAVIORSmust have teacher interventions shown below. Abusive LanguagePhysical/Verbal AggressionDisrespect/InsubordinationLying/CheatingHarassment/BullyingDisruptionTardySkip Class/TruancyProperty DamageForgery/TheftDress Code ViolationVandalismArson
TEACHER INTERVENTION-must turn in paperwork for doc action has been taken.	,
STEP ONE Meet with student one-on-oneSTEP TWO Speak to parent/guardian on telephoneSTEP THREE Meet with student and Parent face-to-faceSTEP FOUR Refer to office	Write a description of Behavior being reported to office. Be as specific as possible. Use back if necessary.
REFERRAL TO OFFICE-Action taken Meet with StudentTelephone ParentHad Conference with ParentAssign Noon DetentionAssign After School DetentionSuspend Privileges (computer or library)ISS Date	