

Be Respectful, Be Responsible, Be Safe
Liberty Elementary
 Office Referral Form

Name: _____ Date: _____ Time: _____ Teacher: _____ Grade: K 1 2 3 4 5 6 Referring Staff: _____	Location: <input type="radio"/> Playground <input type="radio"/> Library <input type="radio"/> Cafeteria <input type="radio"/> Restroom <input type="radio"/> Hallway <input type="radio"/> Arrival/Dismissal <input type="radio"/> Classroom <input type="radio"/> Other _____
--	---

The following behaviors are considered "MAJOR", and will be automatically referred to an administrator:

Problem Behavior	Administrative Decision
<input type="radio"/> Stealing <input type="radio"/> Weapon(s) <input type="radio"/> Severe Defiance <input type="radio"/> Property Misuse <input type="radio"/> Alcohol/Drugs <input type="radio"/> Abusive Language <input type="radio"/> Fighting/Physical Aggression <input type="radio"/> Bullying/Harassment <input type="radio"/> 4 th Intervention Log entry <input type="radio"/> Safety Concern <input type="radio"/> Other _____ _____ _____ _____	<input type="radio"/> Written reflection <input type="radio"/> Counseling opportunity <input type="radio"/> Goal setting <input type="radio"/> Loss of privilege(s) <input type="radio"/> Time in office <input type="radio"/> Conference with student <input type="radio"/> Parent contact <input type="radio"/> Individualized Instruction <input type="radio"/> In-school suspension _____hours_____days <input type="radio"/> Out of school suspension _____hours_____days <input type="radio"/> Other _____ _____ _____

Other comments:

Parent Signature _____ Date _____

Parent Comments/Requests:
