

TEACHER DISCIPLINARY REFERRAL



School _____ Date _____

Student _____ Grade _____ Race _____ Sex _____

Date of Incident _____ Time _____ Teacher/Bus Driver _____

NOTICE TO PARENTS: All teachers and bus drivers are authorized to hold every pupil strictly accountable for any disorderly conduct in school or on the playground of the school, during intermission or recess period or on any school bus going to or returning from school. (TCA 49-6-4102)

INCIDENT LOCATION (i.e., room#, bus#, etc.) _____

Referral to Parent <i>The following student behaviors should be managed in the classroom by the teacher(s) and do not warrant office referrals. Bus drivers may submit all concerns to administration.</i>	Referral to Office <i>Administration should be contacted for these violations. Administration shall notify law enforcement and appropriate others for any possible criminal offenses (i.e., drugs, weapons, etc.)</i>
<ul style="list-style-type: none"> <input type="radio"/> Disruptive/Off-task Behavior <i>(i.e., excessive talking, sleeping, walking, playing, checking or other mild disruptions, ignoring safety procedures, use of electronics, phones, tablets, etc.)</i> <input type="radio"/> Lack of preparation <i>(i.e., missing materials, incomplete homework, inappropriate dress, etc.)</i> <input type="radio"/> Eating/Drinking in class <input type="radio"/> Abusing hall pass privileges <i>(i.e., slothful transitions, cutting class, excessive tardiness, unauthorized area, etc.)</i> <input type="radio"/> Use of indirect profanity <i>(not towards people)</i> <input type="radio"/> Defiance/Mild disrespect to teacher or students <i>(verbal; i.e., arguing, disrespectful tone/attitude, general surliness, etc.)</i> <input type="radio"/> Mild insubordination <i>(i.e., slothfully/not following directions, procedures, rules, communicated by teacher when asked (minimal disruption but direct non-compliance))</i> 	<ul style="list-style-type: none"> <input type="radio"/> Fighting <i>(not self-defense)</i> <input type="radio"/> Profanity directed towards staff/student <i>(i.e., racial slurs, derogatory language)</i> <input type="radio"/> Threatened violence <i>(physical or extreme verbal aggression with specific threats towards student or staff)</i> <input type="radio"/> Theft/Vandalism <input type="radio"/> Repeated or extreme insubordination <i>(teacher has evidence of intervention but student's behavior is persistent and non-responsive)</i> <input type="radio"/> Bullying, Cyber-bullying, Harassment & Intimidation <i>(once reported by student or noticed by an adult and there is a possible imbalance of power...see Policy 6046)</i> <input type="radio"/> Gang Activity/Recruiting <input type="radio"/> Any possible criminal offense <i>(i.e., possession of weapons, explosives, drugs/drug paraphernalia, etc.)</i>
Teacher Notes:	
Student Statement <i>(may also attach separately):</i>	
Classroom Response(s): <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> Change of Seating <input type="checkbox"/> Detention </div> <div style="width: 50%;"> <input type="checkbox"/> Denied Privileges <input type="checkbox"/> Supervised Study </div> <div style="width: 50%;"> <input type="checkbox"/> Confiscated Item(s) <input type="checkbox"/> Character Ed. Training </div> <div style="width: 50%;"> <input type="checkbox"/> Parent-Teacher Conf. <input type="checkbox"/> Referral to Counseling </div> <div style="width: 50%;"> <input type="checkbox"/> IEP/504 Review <input type="checkbox"/> BIP Review </div> <div style="width: 50%;"> <input type="checkbox"/> Other _____ </div> </div> <input type="checkbox"/> <i>Student is remorseful/cooperative/no consequence</i>	Administrative Response(s): <input type="checkbox"/> Confiscated Item(s) <input type="checkbox"/> Parent-Admin Conf. <input type="checkbox"/> Referral <i>(i.e., SHAPE, Gang Unit, Counselor, Social Worker, Psychologists)</i> <input type="checkbox"/> Bus Suspension <input type="checkbox"/> In-School Suspension <input type="checkbox"/> Out-of-School Suspension <i>(see Official Notification)</i> <input type="checkbox"/> Other _____
Teacher Signature	Admin Signature
Date	Date