

**PARKWAY LOCAL SCHOOLS
OFFICE REFERRAL FORM**

Name _____ Date _____ Time: _____ Teacher _____ Grade (PreK-12) _____ Referring Staff _____	<p style="text-align: center;">Location</p> <input type="checkbox"/> Playground <input type="checkbox"/> Library <input type="checkbox"/> Cafeteria <input type="checkbox"/> Bathroom <input type="checkbox"/> Hallway <input type="checkbox"/> Arrival/Dismissal <input type="checkbox"/> Classroom <input type="checkbox"/> Bus <input type="checkbox"/> Other _____
---	---

Problem Behavior	Possible Motivation	Administrative Decision
<p>Minor</p> <input type="checkbox"/> Dress Code <input type="checkbox"/> Inappropriate Language <input type="checkbox"/> Physical Contact <input type="checkbox"/> Defiance <input type="checkbox"/> Disruption <input type="checkbox"/> Property Misuse <input type="checkbox"/> Other _____ <p>Major</p> <input type="checkbox"/> Theft/Forgery <input type="checkbox"/> Abusive Language <input type="checkbox"/> Fighting/Physical Aggression <input type="checkbox"/> Overt Defiance <input type="checkbox"/> Harassment/Tease/Taunt <input type="checkbox"/> Disruption <input type="checkbox"/> Dress Code <input type="checkbox"/> Contraband <input type="checkbox"/> Bomb Threat/False Alarm <input type="checkbox"/> Other _____	<input type="checkbox"/> Obtain Peer Attention <input type="checkbox"/> Obtain Adult Attention <input type="checkbox"/> Obtain Items/Activities <input type="checkbox"/> Avoid Peer(s) <input type="checkbox"/> Avoid Adult <input type="checkbox"/> Avoid Task or Activity <input type="checkbox"/> Don't Know <input type="checkbox"/> Other _____	<input type="checkbox"/> Loss of Privilege <input type="checkbox"/> Time in Office <input type="checkbox"/> Conference with Student <input type="checkbox"/> Parent Contact <input type="checkbox"/> Individualized Instruction <input type="checkbox"/> In-School Suspension (_____ hours/days) <input type="checkbox"/> Out of School Suspension (_____ days) <input type="checkbox"/> Other _____

Others involved in incident: None Peers Staff Teacher Substitute
 Unknown Other

If peers were involved, list them _____

Other Comments:
