

Big Jackson Public School  
Office Discipline Referral Form

Student Name: \_\_\_\_\_  
Staff Completing: \_\_\_\_\_

Date/Time: \_\_\_\_\_  
Grade: \_\_\_\_\_

Location (Please Check):  Classroom  Bathroom  Office  Lunch Room  
 Playground  Sidewalk  Specials  Off School Grounds

Problem Behavior:  Mean Verbal  Mean Physical  Profanity  Theft  
 Lying  Cheating  Assault  Technology Violation  
 Destruction of Property (  School  Other)  
 Third Offense of Teacher Managed Behavior

Others Involved:  None  Staff  Substitute Teacher  
 Other (Adult or Student): \_\_\_\_\_

Prior Teacher Actions (**For third strike, MUST have used TWO Different intervention strategies**):  
 In-class time out  Think Sheet  Apology  Conference with student  
 Restitution  Privilege Loss  Parent Contact  Other Action Per IEP/Behavior Plan

Administrative Actions (For Administrator to complete):  
 Conference with student  Communication with parent  Apology  
 In School Recess (ISR)  Lunch Detention  Privilege Loss  
 Restitution  In School Suspension  Loss of Field Trip  
 Send Home  Friday School Assignment  
 Other: \_\_\_\_\_

Administrator Signature: \_\_\_\_\_

Teacher Signature: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Resolution:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_