

Bland County High School
Office-Discipline Referral Form

Student: _____ Referring Staff: _____

Grade: _____ Date: _____ Time: _____

Location of Rule Violation

Cafeteria	Classroom	Music	Computer Lab	Gym	Library
Breakfast	Lunch	Bathroom	Hallway	Special Event	Art
Other: _____					

Problem Behavior

Disruption	Insubordination/defiance	Alcohol/drug/tobacco	Mischief
Threat(s)	Destruction of School Property	Technology violation	
Disrespectful	Stealing	Inappropriate language/Gestures	
Lying/cheating	Refusal to work/participate	Confrontation	
Improper dress	Harassment/bullying	Fight/physical aggression	
Annoys Classmates	Possession of weapon	Other _____	

Brief description of behavior: _____

Check The Appropriate Box

ACTIONS TAKEN PRIOR TO REPORT

Issued Warning	In-Class Time Out	Reward System
Student Conference	Privilege Loss	Silent Lunch
Parent Conference	Consulted Counselor	Other

Comments: _____

ADMINISTRATIVE ACTIONS

Issued Warning	COMMENTS: _____ _____ _____ _____ _____
Student Conference	
Parent Conference/Phone	
Parent Conference/Requested	
ISS	

Principal _____

OSS/Letter Attached

Parent(s) Signature