CLASSROOM BEHAVIOR MANAGEMENT FORM FOR MINOR OFFENSES IN ELEMENTARY/SECONDARY SCHOOLS

STUDENT_____ **I.D.**_____ **DATE**_____

TEACHER _____ **SUBJECT** _____ **PERIOD** _____

CIRCLE IF APPLICABLE TO STUDENT: ESE ESOL

The above student's behavior has been disruptive to the class and inhibits my ability to teach. Specifically, the problem is:

_____

_____

As the classroom teacher, I have taken the following steps to correct the problem:

1st Offense: An **AFTER-CLASS DISCUSSION** was held on _____with the student regarding the above problem. The student's reaction to the problem and my suggestions for improvement were:

_____ **Favorable** _____ **Unfavorable** _____ **No reaction**

_____ _____

Teacher Signature Student Signature

2nd Offense: A **FORMAL TEACHER/STUDENT CONFERENCE** was held on

_____ at _____.

(DATE) (TIME)

The problem was again discussed, and the student was warned that further misbehavior would result in a referral to the office. The student's reaction to my suggestions for improvement were:

_____ **Favorable** _____ **Unfavorable** _____ **No reaction**

PARENT PHONE CONTACT

(Name and No.) _____ was called on _____. The parent was advised of the problems and the steps taken thus far by me to remedy the problem. The parent's support was requested. Parent reaction was:

_____ **Positive** _____ **Neutral** _____ **No reaction**

3rd Offense: The following **RESOURCE PEOPLE** were consulted:

A. Department/Team Chairman/Leader: The following recommendation/s was made:

_____

B. Guidance Counselor: The following recommendation/s was made:

_____

C. Other: The following assistance was provided:

_____

4th Offense: THE **PROBLEM PERSISTS**: I request administrative assistance with this student. **[Send this form and the student to the office.]**

Date/Time Student Sent _____ Teacher signature _____

White – Office Yellow – Parent Pink – Guidance Gold – Referring Teacher