

Draper Elementary

Student Referral

Name: _____ Date: _____

Teacher's Name: _____ Grade: _____

Rules Not Followed:

1. Be Safe
2. Be Responsible
3. Be Kind

Location: hallway restroom playground
 media classroom lunchroom
 bus gym other

Comment: _____

Given by: _____

White- Home Pink-Teacher Yellow-Office

Disciplinary Action:

- | | |
|--|---|
| <input type="checkbox"/> Conference with Student | <input type="checkbox"/> Reviewed social skill |
| <input type="checkbox"/> Parent Notified: | <input type="checkbox"/> Written apology |
| <input type="checkbox"/> by telephone _____ | <input type="checkbox"/> Restricted from activity |
| <input type="checkbox"/> by this form | <input type="checkbox"/> In-school suspension |
| <input type="checkbox"/> by letter/e-mail | <input type="checkbox"/> Suspension from __to__ |
| <input type="checkbox"/> Conference with parent | <input type="checkbox"/> Student contract/tracker |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Lunch Detention |

Next Step: _____

Student signature

Parent Signature

Administration signature

_____/_____
Date Time