



Stage 2 and 3 OFFICE DISCIPLINE REFERRAL

Office Use Only:
Synergy
Incident ID: _____

Incident Reported by: _____ Date of Incident: _____ Time _____ am or pm

STUDENT:

- | | | | | |
|-----------------------------------|------------------------------------|--|----------------------------------|---|
| <input type="checkbox"/> Bathroom | <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Gym | <input type="checkbox"/> Library | <input type="checkbox"/> Playground |
| <input type="checkbox"/> Bus (on) | <input type="checkbox"/> Classroom | <input type="checkbox"/> Hallway | <input type="checkbox"/> Office | <input type="checkbox"/> Special Event/Field Trip |
| <input type="checkbox"/> Bus area | <input type="checkbox"/> Commons | <input type="checkbox"/> Counseling Office | <input type="checkbox"/> Other | <input type="checkbox"/> Stairs |

DESCRIPTION OF INCIDENT: WHAT HAPPENED? (Include quotes, facts & details; attach added information if necessary)

Stage 2 (Significant or Intense) or Chronic Early-Stage Misbehavior (attach Stage 1 Behavior Report)
Stage 3 (Extreme and/or Harmful to Others)

Prior Teacher/Staff Interventions: Re-taught Rule, Warnings, Teacher/Student Conference, Time Out, Parent/Guardian Contact, Detention, Loss of Privilege, Other

PARENT/GUARDIAN CONTACT email, fax, home visit, letter, parent conference, telephone, voice message

Date: _____ Contacted by: _____ Conference/hearing date & time: _____

Stage 2	<input type="checkbox"/> Class Cutting/Leaving w/o Permission	<input type="checkbox"/> Indecent (Obscene) Gesture	<input type="checkbox"/> Property Damage - Minor
	<input type="checkbox"/> Deliberate Misuse of Property	<input type="checkbox"/> Interference w/ School Personnel	<input type="checkbox"/> Reckless Vehicle Use
	<input type="checkbox"/> Display of Patently Offensive Material	<input type="checkbox"/> Intimidation	<input type="checkbox"/> Tardiness
	<input type="checkbox"/> Disruptive Conduct	<input type="checkbox"/> Language: Abusive/Profane	<input type="checkbox"/> Technology, Use Violation
	<input type="checkbox"/> Dress Code Violation	<input type="checkbox"/> Loitering	<input type="checkbox"/> Theft: Minor
	<input type="checkbox"/> Forgery	<input type="checkbox"/> Off Limits	<input type="checkbox"/> Trespassing
	<input type="checkbox"/> Gambling	<input type="checkbox"/> Physical Contact, inappropriate	<input type="checkbox"/> Truancy
	<input type="checkbox"/> Insubordination/Defiance/Willful Disobedience	<input type="checkbox"/> Plagiarism/Cheating	
		<input type="checkbox"/> Possession of Prohibited Item	
		<input type="checkbox"/> Possession of Stolen Property	
Stage 3	<input type="checkbox"/> Alcohol/Drug	<input type="checkbox"/> Gang Member Identifier	<input type="checkbox"/> Theft: Major
	<input type="checkbox"/> Arson or Attempted Arson	<input type="checkbox"/> Harassment or Bullying Based on: Disability, Sex, Sexual Orientation or Gender Expression, Race, Color, National Origin, or Religion	<input type="checkbox"/> Threat Causing Fear of Harm
	<input type="checkbox"/> Physical Attack / Harm		<input type="checkbox"/> Tobacco, Use and/or Possession
	<input type="checkbox"/> Bomb Threat	<input type="checkbox"/> Hazing	<input type="checkbox"/> Weapon: <i>Call Student Conduct Coordinator (503) 916-3711 immediately to consult about next steps.</i>
	<input type="checkbox"/> Burglary	<input type="checkbox"/> Indecent Exposure	
	<input type="checkbox"/> Extortion	<input type="checkbox"/> Property Damage - Major	
	<input type="checkbox"/> False Fire Alarm	<input type="checkbox"/> Robbery	
	<input type="checkbox"/> Fighting		
	<input type="checkbox"/> Firecrackers/Explosives		

Note: This document does NOT replace nor is it a substitute for suspension/expulsion notification letters.

ACTIONS/DISPOSITIONS	ACTIONS/DISPOSITIONS	Notes
<input type="checkbox"/> Conference <input type="checkbox"/> Letter of Apology <input type="checkbox"/> Student Contract <input type="checkbox"/> Detention <input type="checkbox"/> Community Service <input type="checkbox"/> Restitution <input type="checkbox"/> Restorative Process	<input type="checkbox"/> Loss of Privilege: Computer, Gym, Library, Other <input type="checkbox"/> Suspension: Bus, In School, Out of School, Pending Expulsion <input type="checkbox"/> Notified Authorities <input type="checkbox"/> Other:	 Action First Day _____ Last Day _____

REFERRAL TO OTHER RESOURCES: _____ Date: _____

PARENT/GUARDIAN CONTACT email, fax, home visit, letter, parent conference, telephone, voice message Date: _____

Contacted by: _____ Conference/hearing date & time: _____