

## OELRICHS SCHOOL DISTRICT OFFICE DISCIPLINE REFERRAL FORM (ODR)

Student Name		Reported By	Date	Time	Teacher/Team
	Grade				

**SWIS MAJOR PROBLEM BEHAVIOR** (Check all that apply) Administration decides which to report in system

Abusive Language	Fighting	Possession or Use of Weapons	Disrespect/Insubordination /Non-Compliance	Inappropriate Display of Affection
Arson	Gang Affiliation	Robbery	Disruption of Learning Environment	Larceny
Assault	Possession or Use of Alcohol	Vandalism	Dress Code Violation	Skipping/Truancy
Bullying/Harassment Behaviors	Possession or Use of Drugs		Encouraging a Conflict	Technology/Electronic Device Violation
False Fire Alarm/Bomb Threat	Possession or Use of Inhalants	Combustibles	Forgery	Tobacco

**REASON FOR REFERRAL** (Describe Incident)

<b><u>LOCATION</u></b> (Check One)		<b><u>POSSIBLE MOTIVATION</u></b> (Check One)		<b><u>OTHERS INVOLVED</u></b> (Check One)	
Classroom	Library	Avoid Adults	None		
Hallway	On Bus	Avoid Peers	Peers		
Commons Area	Parking Lot	Avoid Task/Activities	Staff		
Outside Area	Bus Loading Zone	Obtain Adult Attention	Substitute		
Lunch Area	Assembly/Field Trip	Obtain Peer Attention	Administration		
Bathroom	Locker Room	Obtain Items/Activities	Other		
Gym	Other	Unknown			

**INTERVENTION/ADMINISTRATIVE DECISION** (Check all that apply)

Conference with Student	Contract with school	In School Suspension # of Days:
Loss of Privileges	Time in Office	Out of School Suspension # of Days:
Parent Contact-Phone Contact	Individualized Instruction	Refer to Counselor
OSSI Referral	Conflict Resolution/Mediation	Superintendent Conf/Board Hearing
Bus Suspension # of Days:	MAST -Mandatory After School Tutoring	Other

**STUDENT RESPONSE:** (Office Use Only)

