



# CUSD Office Data Referral Form

BE SAFE! BE RESPONSIBLE! BE RESPECTFUL!

Entered into Aeries:

Incident ID: \_\_\_\_\_

Initial \_\_\_\_\_

Date \_\_\_\_\_

Student: \_\_\_\_\_ Permanent ID: \_\_\_\_\_

Referring Staff (print name): \_\_\_\_\_ Grade: \_\_\_\_\_

Time of Incident: \_\_\_\_\_:\_\_\_\_\_ Date of Incident: \_\_\_\_\_

Location (Check only 1)	Problem Behavior (Check only 1)	Environmental Factors (Check only 1)	Perceived Motivation (Check only 1)
<input type="checkbox"/> Gate <input type="checkbox"/> Bus area <input type="checkbox"/> Cafeteria <input type="checkbox"/> Classroom <input type="checkbox"/> Library <input type="checkbox"/> Office <input type="checkbox"/> Hallway <input type="checkbox"/> Quad <input type="checkbox"/> Restrooms <input type="checkbox"/> Lunch area <input type="checkbox"/> PE area <input type="checkbox"/> Playground <input type="checkbox"/> Computer lab <input type="checkbox"/> Parking lot <input type="checkbox"/> Other: _____ _____	<input type="checkbox"/> Fighting <input type="checkbox"/> Destruction of property <input type="checkbox"/> Profanity toward staff <input type="checkbox"/> Possession stolen property <input type="checkbox"/> Bullying: <input type="checkbox"/> Committed obscene act <input type="checkbox"/> Weapon: <input type="checkbox"/> Other: _____ <b>Chronic Minor Offenses</b> <i>(Attach Low Level Referrals)</i> Failure to: <input type="checkbox"/> Follow Instructions <input type="checkbox"/> Stay on Task <input type="checkbox"/> Get Teacher's Attention <input type="checkbox"/> Accept "No" for Answer <input type="checkbox"/> Accept Criticism/Feedback <input type="checkbox"/> Disagree Appropriately <input type="checkbox"/> Work with Others <input type="checkbox"/> Properly Use Materials <input type="checkbox"/> Appropriate Word Choice <input type="checkbox"/> Other: _____	<input type="checkbox"/> Adult request/directive <input type="checkbox"/> Oral instruction <input type="checkbox"/> Individual seat work <input type="checkbox"/> Group work <input type="checkbox"/> Managing materials <input type="checkbox"/> External interruptions (guest, PA, phone call, etc.) <input type="checkbox"/> Classroom transitions <input type="checkbox"/> Passing period <input type="checkbox"/> Teasing from peers <input type="checkbox"/> Changes to routine <input type="checkbox"/> Guest Teacher <input type="checkbox"/> Assembly <input type="checkbox"/> Recess <input type="checkbox"/> Other: _____	<input type="checkbox"/> Gain peer attention <input type="checkbox"/> Gain adult attention <input type="checkbox"/> Gain/obtain item <input type="checkbox"/> Gain/obtain activity <input type="checkbox"/> Avoid peer(s) <input type="checkbox"/> Avoid adult(s) <input type="checkbox"/> Avoid seat work <input type="checkbox"/> Avoid group work <input type="checkbox"/> Avoid scheduled event <input type="checkbox"/> Other: _____

Provide a behaviorally specific description of the incident: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Others involved in the incident:  Peers  Staff  Guest Teacher  None  N/A

Last parent/guardian contact: \_\_\_/\_\_\_/\_\_\_ Type of Communication:  Written  Phone Call  Meeting

Referring Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Disposition - Administrative Action Taken

### Skill Development:

- Identified Academic Deficits: (see attached data)
- Identified Environmental/Functional Factors:
- Identified Behavior Skill Deficit(s):
- Provided Corrective Teaching and Facilitated Student Re-entry
- Assigned Targeted Skill Development:
- Scheduled Follow-Up Meeting:  Teacher  Guardian  Team:
- Developed *Behavior Contract*: \_\_\_/\_\_\_/\_\_\_
- Assigned Adult Mentor: \_\_\_\_\_
- Scheduled *Behavior Support Plan (BSP)*: \_\_\_/\_\_\_/\_\_\_
- Other: \_\_\_\_\_

### Removal/Penalty:

- Removed Privilege:
- Restricted Activity:
- Assigned Time-out:
- Contacted Parent/Guardian:
- Assigned OCS:
- Assigned Detention:
- Assigned Suspension:
- Restorative Action:
- Other: \_\_\_\_\_

Administrator's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

White: Student File

Yellow: Guardian

Pink: Teacher

Goldenrod: Other