School Set Up

School Name: My School

Student Enrollment

- 2017-2018: 500
- 2016-2017: 498
- 2015-2016: 501
- 2014-2015: 511

Hispanic/Latino: 150
Non-Hispanic/Latino: 350

Race:

- Asian: 24
- Native American: 1
- White: 227
- African American/Black: 98
- Native Hawaiian/Pacific Islander: 0
- Students with IEPs: 60

* As per Federal guidelines, students are not counted twice. Hispanic is considered a subgroup. Students counted as Hispanic are not counted in any other racial subgroup.

Staff Members

- Horace Mann Bond
- William T. Harris
- John Dewey (Principal)
- Maria Montessori
- Jane Adams

Number of Days School is in Session for Students

- August: 11
- September: 22
- October: 25

Student Demographics

<table>
<thead>
<tr>
<th>Number</th>
<th>Name</th>
<th>Grade</th>
<th>Gender</th>
<th>Ethnicity</th>
<th>Race</th>
<th>IEP</th>
</tr>
</thead>
<tbody>
<tr>
<td>444444</td>
<td>Fred Herckemer</td>
<td>4</td>
<td>M</td>
<td>Hispanic</td>
<td>Black</td>
<td>Yes</td>
</tr>
<tr>
<td>111111</td>
<td>John Doe</td>
<td>1</td>
<td>M</td>
<td>Non-Hispanic</td>
<td>Black</td>
<td>No</td>
</tr>
<tr>
<td>222222</td>
<td>Jane Doe</td>
<td>3</td>
<td>F</td>
<td>Non-Hispanic</td>
<td>White</td>
<td>No</td>
</tr>
<tr>
<td>333333</td>
<td>Mary Smith</td>
<td>5</td>
<td>F</td>
<td>Non-Hispanic</td>
<td>Asian</td>
<td>Yes</td>
</tr>
</tbody>
</table>
# Elementary Office Discipline Referral Form

**Student:** Fred Herckemer  
**Student #** 444444  
**Date:** 8/29/2017  
**Time of Incident:** 12:15

**Classroom Teacher:** Horace Mann Bond  
**Referred by:** Horace Mann Bond

**Location of Incident:** (please check)  
- [ ] Restroom  
- [ ] Library  
- [x] Playground  
- [ ] Hallway  
- [ ] Special event (field trip/assembly)  
- [ ] Bus area  
- [ ] On bus  
- [ ] Cafeteria  
- [ ] Classroom  
- [ ] Other ______________

**REASON(S) FOR THE REFERRAL:** (Please attach narrative of the incident if necessary.)

<table>
<thead>
<tr>
<th>SAFETY</th>
<th>RESPECT</th>
<th>RESPONSIBILITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minor:</td>
<td>Minor:</td>
<td>Minor:</td>
</tr>
<tr>
<td>- Physical contact</td>
<td>- Defiance/disrespect/non-compliance</td>
<td>- Property misuse</td>
</tr>
<tr>
<td>Major:</td>
<td>Major:</td>
<td>Major:</td>
</tr>
<tr>
<td>- Fighting/Physical Aggression</td>
<td>- Inappropriate Language</td>
<td>- Dress Code Violation</td>
</tr>
<tr>
<td>- Harassment/Bullying</td>
<td>- Disruption</td>
<td>- Inappropriate Location/Out of Bounds Area</td>
</tr>
<tr>
<td>- Property Damage/Vandalism</td>
<td>- Use/Possession of Weapons</td>
<td>- Lying/Cheating</td>
</tr>
<tr>
<td>- Use/Possession of Weapons</td>
<td>- Other</td>
<td>- Technology violation</td>
</tr>
<tr>
<td>- Other ______________</td>
<td></td>
<td>- Use/Possession of Tobacco</td>
</tr>
</tbody>
</table>

**POSSIBLE MOTIVATION:**  
- [ ] Attention from peers(s)  
- [x] Attention from adult(s)  
- [ ] Avoid peer(s)  
- [ ] Avoid adult(s)  
- [ ] Avoid work  
- [ ] Obtain item  
- [ ] Don’t know  
- [ ] Other ______________

**OTHERS INVOLVED:**  
- [ ] None  
- [x] Peers  
- [ ] Staff  
- [ ] Teacher  
- [ ] Substitute  
- [ ] Unknown  
- [ ] Other ______________

**TEACHER ACTION TAKEN PRIOR TO REFERRAL:**  
- [ ] Changed student’s seat  
- [ ] Consulted Counselor  
- [ ] Sent previous report home  
- [ ] Conferred privately with student  
- [x] Consulted Principal  
- [ ] Time out in the classroom  
- [ ] Met with Student Assistance Team  
- [ ] Telephoned parent/guardian  
- [ ] Other (Please specify) ______________

**TYPE OF DISCIPLINE ASSIGNED BY ADMINISTRATOR:**  
- [ ] Counselor referral  
- [ ] Out of school suspension (______ days)  
- [x] Agency referral  
- [ ] In-school detention  
- [ ] Time out in office  
- [ ] Loss of privilege  
- [ ] Conference with student  
- [ ] Restitution  
- [ ] Parent contact  
- [ ] Individual instruction  
- [ ] Sent home  
- [ ] Other: ______________

**Parent Contacted:** (Check one)  
- [ ] Call  
- [ ] Mail  
- [ ] Message  
- [ ] Email  
- [ ] Conference

**COMMENTS:** (Use back if needed)

**Teacher’s Signature:** Horace Mann Bond  
**Principal’s Signature:** John Dewey
Elementary Office Discipline Referral Form

<table>
<thead>
<tr>
<th>Student: Fred Herckemer</th>
<th>Student #: 444444</th>
<th>Date: 9/16/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade: K 1 2 3 4 5</td>
<td>Time of Incident: 12:30</td>
<td></td>
</tr>
<tr>
<td>Classroom Teacher: Horace Mann Bond</td>
<td>Referred by: Horace Mann Bond</td>
<td></td>
</tr>
</tbody>
</table>

Location of Incident: (please check)
- [ ] Restroom
- [ ] Library
- [x] Playground
- [ ] Hallway
- [ ] Special event (field trip/assembly)
- [ ] Bus area
- [ ] On bus
- [ ] Cafeteria
- [ ] Classroom
- [ ] Other

REASON(S) FOR THE REFERRAL: (Please attach narrative of the incident if necessary.)

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<th>SAFETY</th>
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<td>[ ] Defiance/disrespect/non-compliance</td>
<td>[ ] Property misuse</td>
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<tr>
<td>Major:</td>
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<td>[ ] Disruption</td>
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<td>[ ] Property Damage/Vandalism</td>
<td>[ ] Other</td>
<td>[ ] Lying/Cheating</td>
</tr>
<tr>
<td>[ ] Use/Possession of Weapons</td>
<td>[ ] Disruption</td>
<td>[ ] Technology violation</td>
</tr>
<tr>
<td>[ ] Other</td>
<td>[ ] Other</td>
<td>[ ] Property Damage/Vandalism</td>
</tr>
</tbody>
</table>

POSSIBLE MOTIVATION:
- [ ] Attention from peers(s)
- [ ] Attention from adult(s)
- [ ] Avoid peer(s)
- [ ] Avoid adult(s)
- [ ] Avoid work
- [ ] Obtain item
- [ ] Don’t know
- [ ] Other

OTHERS INVOLVED:
- [ ] None
- [x] Peers
- [ ] Staff
- [ ] Teacher
- [ ] Substitute
- [ ] Unknown
- [ ] Other

TEACHER ACTION TAKEN PRIOR TO REFERRAL:
- [ ] Changed student’s seat
- [ ] Consulted Counselor
- [ ] Sent previous report home
- [ ] Conferred privately with student
- [ ] Consulted Principal
- [ ] Time out in the classroom
- [ ] Met with Student Assistance Team
- [ ] Telephoned parent/guardian
- [ ] Other (Please specify)

TYPE OF DISCIPLINE ASSIGNED BY ADMINISTRATOR:
- [x] Counselor referral
- [ ] Out of school suspension (1 days)
- [ ] Agency referral
- [ ] In-school detention
- [ ] Time out in office
- [ ] Loss of privilege
- [ ] Conference with student
- [ ] Restitution
- [ ] Parent contact
- [ ] Individual instruction
- [ ] Sent home
- [ ] Other: ________________

Parent Contacted: (Check one) __Call __Mail __Message __Email __Conference

COMMENTS: (Use back if needed)

Teacher’s Signature: Horace M. Bond
Principal’s Signature: John Dewey
### Elementary Office Discipline Referral Form

**Student:** Fred Herckemer  
**Student #:** 444444  
**Date:** 8/29/2017

**Grade:** 4  
**Time of Incident:** 12:15

**Classroom Teacher:** Horace Mann Bond  
**Referred by:** Horace Mann Bond

**Location of Incident:** (please check)
- Restroom
- Library
- Playground
- Hallway
- Special event (field trip/assembly)
- Bus area
- On bus
- Cafeteria
- Classroom
- Other __________

### REASON(S) FOR THE REFERRAL:

**SAFETY**
- Minor:   
  - ☐ Physical contact
- Major:   
  - ☑ Fighting/Physical Aggression
  - ☐ Harassment/Bullying
  - ☐ Property Damage/Vandalism
  - ☐ Use/Possession of Weapons
  - ☐ Other __________

**RESPECT**
- Minor:   
  - ☐ Defiance/disrespect/non-compliance
  - ☐ Inappropriate Language
  - ☐ Disruption
- Major:   
  - ☑ Defiance/Disrespect/Insubordination/Non-Compliance
  - ☐ Disruption
  - ☐ Abusive/inappropriate Language
  - ☐ Property Damage/Vandalism
  - ☐ Other __________

**RESPONSIBILITY**
- Minor:   
  - ☐ Property misuse
  - ☐ Dress Code Violation
- Major:   
  - ☐ Inappropriate Location/Out of Bounds Area
  - ☐ Lying/Cheating
  - ☐ Technology violation
  - ☐ Use/Possession of Tobacco
  - ☐ Other __________

### POSSIBLE MOTIVATION:

- ☑ Attention from peers(s)
- ☐ Attention from adult(s)
- ☑ Avoid peer(s)
- ☐ Avoid adult(s)
- ☑ Avoid work
- ☐ Obtain item
- ☐ Don’t know
- ☐ Other __________

### OTHERS INVOLVED:

- ☑ None
- ☐ Peers
- ☐ Staff
- ☐ Teacher
- ☐ Substitute
- ☐ Unknown
- ☐ Other __________

### TEACHER ACTION TAKEN PRIOR TO REFERRAL:

- ☑ Changed student’s seat
- ☐ Consulted Counselor
- ☐ Sent previous report home
- ☑ Conferred privately with student
- ☐ Consulted Principal
- ☐ Time out in the classroom
- ☑ Met with Student Assistance Team
- ☐ Telephoned parent/guardian
- ☐ Other (Please specify __________

### TYPE OF DISCIPLINE ASSIGNED BY ADMINISTRATOR:

- ☑ Counselor referral
- ☐ Out of school suspension (3 days)
- ☐ Agency referral
- ☐ In-school detention
- ☐ Time out in office
- ☐ Loss of privilege
- ☐ Conference with student
- ☐ Restitution
- ☐ Parent contact
- ☐ Individual instruction
- ☐ Sent home
- ☑ Other: __________

**Parent Contacted:** (Check one)  
- ☐ Call  
- ☐ Mail  
- ☐ Message  
- ☐ Email  
- ☐ Conference

**COMMENTS:** (Use back if needed)

Teacher’s Signature: Horace M. Bond  
Principal’s Signature: John Dewey
Elementary Office Discipline Referral Form

<table>
<thead>
<tr>
<th>Student: John Doe</th>
<th>Student #: 222222</th>
<th>Date: 10/13/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade: K</td>
<td>1 2 3 4 5</td>
<td>Time of Incident: 10:35</td>
</tr>
<tr>
<td>Classroom Teacher: William T. Harris</td>
<td>Referred by: William T. Harris</td>
<td></td>
</tr>
</tbody>
</table>

**Location of Incident:** (please check)
- [ ] Restroom
- X Library
- Playground
- Hallway
- Special event (field trip/assembly)
- ___Bus area
- ___On bus
- ___Cafeteria
- ___Classroom
- ___Other

**REASON(S) FOR THE REFERRAL:** (Please attach narrative of the incident if necessary.)

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<td>[ ] Other</td>
<td>[ ] Other</td>
<td>[ ] Use/ Possession of Tobacco</td>
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</table>

**POSSIBLE MOTIVATION:**
- [ ] Attention from peers(s)
- X Attention from adult(s)
- [ ] Avoid peer(s)
- [ ] Avoid adult(s)
- [ ] Avoid work
- [ ] Obtain item
- [ ] Don't know
- [ ] Other

**OTHERS INVOLVED:**
- [ ] None
- [ ] Peers
- [ ] Staff
- X Teacher
- [ ] Substitute
- [ ] Unknown
- [ ] Other

**TEACHER ACTION TAKEN PRIOR TO REFERRAL**
- [ ] Changed student’s seat
- [ ] Confferred privately with student
- [ ] Met with Student Assistance Team
- [ ] Consulted Counselor
- [ ] Consulted Principal
- [ ] Telephoned parent/guardian
- [ ] Sent previous report home
- [ ] Time out in the classroom
- [ ] Other (Please specify)

**TYPE OF DISCIPLINE ASSIGNED BY ADMINISTRATOR:**
- [ ] Counselor referral
- [ ] Out of school suspension (____ days)
- [ ] Agency referral
- [ ] Time out in office
- [ ] Loss of privilege
- [ ] Conference with student
- [ ] Restitution
- [ ] Parent contact
- [ ] Individual instruction
- [ ] Sent home
- [ ] Other: __________

**Parent Contacted:** (Check one)
- [ ] Call
- [ ] Mail
- [ ] Message
- [ ] Email
- [ ] Conference

**COMMENTS:** (Use back if needed)

Teacher’s Signature: Bill Harris  Principal’s Signature: John Dewey
**Elementary Office Discipline Referral Form**

**Student:** Jane Doe  
**Student #:** 222222  
**Date:** 9/12/2017  
**Grade:** K 1 2 3 4 5  
**Time of Incident:** 12:15  
**Classroom Teacher:** Maria Montessori  
**Referred by:** Maria Montessori

**Location of Incident:** (please check)  
- Restroom  
- Library  
- Playground  
- Hallway  
- Special event (field trip/assembly)  
- Bus area  
- On bus  
- Cafeteria  
- Classroom  
- Other ____________

**REASON(S) FOR THE REFERRAL:** (Please attach narrative of the incident if necessary.)

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<td>Major:</td>
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</tr>
<tr>
<td>□ Harassment/ Bullying</td>
<td>□ Disruption</td>
<td>□ Major:</td>
</tr>
<tr>
<td>□ Property Damage/ Vandalism</td>
<td>□ Other</td>
<td>□ Inappropriate Location/ Out of Bounds Area</td>
</tr>
<tr>
<td>□ Use/ Possession of Weapons</td>
<td>□ Leaving/ Cheating</td>
<td>□ Major:</td>
</tr>
<tr>
<td>□ Other ____________</td>
<td>□ Disruption</td>
<td>□ Lying/ Cheating</td>
</tr>
<tr>
<td></td>
<td>□ Abusive/ inappropriate Language</td>
<td>□ Major:</td>
</tr>
<tr>
<td></td>
<td>□ Property Damage/ Vandalism</td>
<td>□ Use/ Possession of Tobacco</td>
</tr>
<tr>
<td></td>
<td>□ Other ____________</td>
<td>□ Major:</td>
</tr>
</tbody>
</table>

**POSSIBLE MOTIVATION:**

<table>
<thead>
<tr>
<th>None</th>
<th>Peers</th>
<th>Staff</th>
<th>Teacher</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Attention from peers(s)</td>
<td>□ Attention from adult(s)</td>
<td>□ Avoid peer(s)</td>
<td>□ Avoid adult(s)</td>
</tr>
<tr>
<td>□ Avoid work</td>
<td>□ Obtain item</td>
<td>□ Don’t know</td>
<td>□ Other ____________</td>
</tr>
</tbody>
</table>

**OTHERS INVOLVED:**

<table>
<thead>
<tr>
<th>None</th>
<th>Peers</th>
<th>Staff</th>
<th>Teacher</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Substitute</td>
<td>□ Unknown</td>
<td>□ Other</td>
<td></td>
</tr>
</tbody>
</table>

**TEACHER ACTION TAKEN PRIOR TO REFERRAL**

<table>
<thead>
<tr>
<th>None</th>
<th>Peers</th>
<th>Staff</th>
<th>Teacher</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Changed student’s seat</td>
<td>□ Consulted Counselor</td>
<td>□ Sent previous report home</td>
<td></td>
</tr>
<tr>
<td>□ Conferred privately with student</td>
<td>□ Consulted Principal</td>
<td>□ Time out in the classroom</td>
<td></td>
</tr>
<tr>
<td>□ Met with Student Assistance Team</td>
<td>□ Telephoned parent/guardian</td>
<td>□ Other (Please specify)</td>
<td></td>
</tr>
</tbody>
</table>

**TYPE OF DISCIPLINE ASSIGNED BY ADMINISTRATOR:**

<table>
<thead>
<tr>
<th>None</th>
<th>Peers</th>
<th>Staff</th>
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</thead>
<tbody>
<tr>
<td>□ Counselor referral</td>
<td>□ Time out in office</td>
<td>□ Parent contact</td>
<td></td>
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<tr>
<td>□ Out of school suspension (___ days)</td>
<td>□ Loss of privilege</td>
<td>□ Individual instruction</td>
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<td>□ Agency referral</td>
<td>□ Conference with student</td>
<td>□ Sent home</td>
<td></td>
</tr>
<tr>
<td>□ In-school detention</td>
<td>□ Restitution</td>
<td>□ Other: ____________</td>
<td></td>
</tr>
</tbody>
</table>

**Parent Contacted:** (Check one)  
- Call  
- Mail  
- Message  
- Email  
- Conference

**COMMENTS:** (Use back if needed)

---

**Teacher’s Signature:** Maria Montessori  
**Principal’s Signature:** John Dewey