

**Central Middle School  
Office Referral Form**

Name: \_\_\_\_\_  
 Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 (list time at quarter hour intervals)  
 Grade: 6      7      8  
 Referring Staff \_\_\_\_\_

**Location**

Outside      Gym      Library  
 Cafeteria      Bathroom  
 Hallway      Arrival/Dismissal  
 Classroom      Other: \_\_\_\_\_

Minor Problem Behavior	Major Problem Behavior	Possible Motivation
Inappropriate Language	Abusive Language	Obtain peer attention
Physical Contact	Physical Aggression	Obtain adult attention
Defiance/Disrespect	Overt Defiance	Obtain items/activities
Disruption	Harassment/Bullying	Avoid task or activity
Property Misuse	Excessive Tardy	Avoid Peer(s)
Tardy	Inappropriate Display Affection	Avoid Adult
Electronic Violation	Intentional Electronic Violation	Don't know
Chewing Gum	Lying/Cheating	Other _____
Not Prepared for Class	Forgery/Plagiarism	
Dress Code	Leaving School Grounds	
Other	Skipping Class/Homeroom	
	Fighting	
	Bus offense	
	Other	

**Others involved in incident:**                      None                      Peers                      Staff  
    Teacher                      Substitute                      Unknown  
    Other

**Staff comments:**

Administrative Decision	
Loss of privileges	Individualized instruction
Time in office	In-school suspension(____hours/days)
Student to Student Med.	Out of school suspension (____days)
Parent Contact	Conference with student and/or teacher
Admin. Detention	Other_____

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I need to talk to the student's teacher.

I need to talk to the administrator.

**Parent Comments:**

\*\*All majors require administrative consequence, parent contact and signature.  
 (Three minors equal a major.)