

# Roxana C.U.S.D. 1 High School Discipline Referral Form (ODR)

Student Name \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Building:  South Roxana  Central  Jr. High  Sr. High Referring Staff Name \_\_\_\_\_

Grade:  9  10  11  12 Classroom Teacher \_\_\_\_\_

**Location:**  School Grounds  Classroom  Commons  Restroom  Bus  Hallway  GYM  
 Under Catwalk  Locker Room  Shop area  Office  Parking area

**MINOR** Check one Reason for Referral

- Disrespect
- Noncompliance
- Disruption
- Inappropriate Language
- Physical Contact
- Homework/Incomplete work
- Dress Code
- Cheating
- Electronics
- Tardy to school or class

**MAJOR** Check one Reason for Referral

- Insubordination  Defiance
- Profanity  Theft
- Physical Aggression/Fighting
- Harassment/Bullying
  - Race  Gender  Disability
- Threats  Cheating
- Property Damage/Vandalism
- Weapons  Verbal Confrontation
- Tobacco/Drugs
- Electronic(multiple)  Truancy

**Possible Motivation:**

- Check one
- Obtain Peer Attention
  - Obtain Adult Attention
  - Obtain Items
  - Avoid Task
  - Avoid Peers
  - Avoid Adults
  - Other \_\_\_\_\_

**Others Involved:**  Peers  Staff  Guest Teacher  Teacher  
 Other \_\_\_\_\_

**Minor/Staff Managed Action Taken:**  student conference/warning  loss of privilege  
 Teacher detention  Parent/guardian notified  alternate classroom setting/time in office  
 Preferential seating  tutoring (lunch or after school)

**Major/Administrator action taken:**  Conference with student  Lunch detention  
 Conference with parent  Social work referral  After school detention  ISS  OSS  
 Other \_\_\_\_\_  
 Parent/Guardian notified by: \_\_\_\_\_ Date \_\_\_\_\_

**Comments (Facts Only):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE SIGN AND RETURN ON THE NEXT SCHOOL DAY.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Student Signature