

## Application Packet Checklist for ☐ 30-day Removal ☐ 45-day Removal

|                                                      |             |                                                     |                                                                    |
|------------------------------------------------------|-------------|-----------------------------------------------------|--------------------------------------------------------------------|
| Name:                                                | ID#:        | DOB:                                                | Grade:                                                             |
| Campus:                                              | Infraction: | <input type="checkbox"/> 1 <sup>st</sup> Infraction | <input type="checkbox"/> 2 <sup>nd</sup> /Subsequent Infraction(s) |
| Campus Personnel Completing File and Contact Number: |             |                                                     |                                                                    |

All removal packets require a cover page, divided by tabs, and titled accordingly with the following documents.

| TAB 1: Due Process          |                                                                                           |
|-----------------------------|-------------------------------------------------------------------------------------------|
| 1.                          | Form requesting an extension (if the hearing exceeds 7 days)                              |
| 2.                          | Notice of Hearing                                                                         |
| 3.                          | Notice of Representation                                                                  |
| 4.                          | Hearing Procedures                                                                        |
| 5.                          | Verification of Non-Protection under IDEA/504/E-School Demographics                       |
| 6.                          | Consideration Form                                                                        |
| TAB 2: Violation of SCC     |                                                                                           |
| 1.                          | Student code of conduct receipt form (Must be current Sch. Yr & signed by parent/student) |
| 2.                          | Discipline Referral                                                                       |
| 3.                          | Administrator's Statement                                                                 |
| 4.                          | Witness(es) statement(s)                                                                  |
| 5.                          | Police report, if applicable                                                              |
| 6.                          | Nurse's report                                                                            |
| TAB 3: Student Services     |                                                                                           |
| IDEA Documentation          |                                                                                           |
| 1.                          | Staffing Checklist                                                                        |
| 2.                          | FBA/BIP (current)                                                                         |
| 3.                          | IDEA: Manifestation Checklist                                                             |
| 4.                          | IDEA: Placement ARD Signature Page; ARD minutes & Schedule of Services                    |
| 504 Documentation           |                                                                                           |
| 1.                          | Section 504: Manifestation Determination Evaluation Results                               |
| 2.                          | Section 504: Behavior Intervention Plan                                                   |
| 3.                          | Section 504: Student Services Plan                                                        |
| Bilingual/ESL Documentation |                                                                                           |
| 1.                          | Bilingual / ESL LPAC Assessment Form (from Special Program Folder)                        |
| 2.                          | Individual Cumulative Report                                                              |
| 3.                          | E-schools Bilingual Screen                                                                |
| TAB 4: RTI                  |                                                                                           |
|                             | Please check one: Academic <input type="checkbox"/> Discipline <input type="checkbox"/>   |
| 1.                          | Parent Input                                                                              |
| 2.                          | Referral Information                                                                      |
| 3.                          | Teacher Input                                                                             |
| 4.                          | Behavior Intervention Plan                                                                |
| TAB 5: BAC Entry Forms      |                                                                                           |
| 1.                          | Removal letter / Order of removal (only 1 of 2)                                           |
| 2.                          | Student Registration Information Form                                                     |
| 3.                          | Entry Form                                                                                |
| 4.                          | Health Form                                                                               |
| 5.                          | Parent Letter                                                                             |
| 6.                          | Completed Physical Examination Form                                                       |
| TAB 6: Student Information  |                                                                                           |
| 1.                          | Current Schedule (If working on STARS modules provide course progress-#4 below)           |
| 2.                          | Report Card (all six weeks periods must be complete)                                      |
| 3.                          | Summary Assessment Form – Check One:                                                      |
|                             | <input type="checkbox"/> Test Hound <input type="checkbox"/> No Accommodations            |
| 4.                          | STARS Progress Reports (High School or BLA)                                               |
| 5.                          | Student Credit Count (Seniors Only)                                                       |

### Preliminary Packet Checklist

#### Special Services: Tab 3, IDEA 1-2 only

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

Approved ☐ Not Approved ☐

Administrator (signature) \_\_\_\_\_

Remarks: \_\_\_\_\_

#### Brownsville Academic Center: Tab 1-6

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

Approved ☐ Not Approved ☐

Principal (signature) \_\_\_\_\_

☐ Student may report to BAC on:

\_\_\_\_/\_\_\_\_/\_\_\_\_

☐ Returned for Corrections

Accelerated Learning Instruction  
needed in the following areas (s):

Notes: \_\_\_\_\_



**Brownsville Independent School District**  
**Department of Pupil Services**  
**708 Palm Blvd., Brownsville, Texas 78521**  
**Office (956) 544-3966**



## **Notice of Short and/or Long Term Removal Hearing to the Brownsville Academic Center**

Student:

Parent(s) or Guardian(s):

Address:

City/Zip Code:

NOTICE is hereby given that the designee of the Superintendent of the Brownsville Independent School District will hold and conduct a formal campus hearing located at:

On \_\_\_\_\_ beginning at \_\_\_\_\_ for the purpose of a hearing, considering and acting upon the following petition:

Removal to the Brownsville Academic Center (BAC) for a total of \_\_\_\_\_ school days due to the following offense: (Specify Infraction)

NOTICE: The District may hold the hearing regardless of whether the student, student's parent or guardian, or another adult representing the student attends, provided that the school has made a good-faith effort to inform the student and student's parent or guardian of the time and place of the hearing. 37.09(f)

\_\_\_\_\_  
Notice of Hearing Received by

\_\_\_\_\_  
Date



**Brownsville Independent School District**  
**Department of Pupil Services**  
**708 Palm Blvd., Brownsville, Texas 78521**  
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## **Notice of Representation by an Adult at the Hearing**

You have the right to be assisted at a Disciplinary Alternative Education Program removal hearing by another adult, other than the parent/guardian, who can provide guidance to the student and who is not an employee of the school district (i.e., relative, friend, lawyer, etc.).

### **Parents, Guardian or Persons Responsible for**

I have received, read and carefully reviewed the statement and understand its relevance.

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

\_\_\_\_\_  
Date

A copy of this notice was given to the parent/guardian/persons responsible on \_\_\_\_\_.  
Date

\_\_\_\_\_  
Signature of Campus Behavior Coordinator  
or appropriate administrator

\_\_\_\_\_  
Date



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## **Procedures for Short and/or Long Term Removals**

The Petitioner (campus administration) will make a short opening statement, and may present the facts by oral testimony or written evidence, including affidavits, if desired, or by both.

When the Petitioner has closed, the Respondents (Student and/or parent/guardian) will be allowed to make a short opening statement and may present the facts by oral testimony, written evidence, including affidavits if desired, or by both.

When the Respondents have closed, the Petitioner will be allowed to present a short rebuttal.

Written statements for the petitioner and/or respondent may be presented during this time.

Any Respondent who desires to be heard, but who cannot be present on the date set, may for good cause shown to the satisfaction of the Campus Hearing Officer or his/her designee, have the hearing postponed to a day of mutual convenience: but only one such postponement shall be allowed.

Any Respondent who does not appear or request a postponement will be deemed to have defaulted, but as to any such Respondent, the Petitioner will be required to make out a prima facie case.

If the hearing is not completed after a reasonable time, the Campus Hearing Officer may adjourn to a certain day and continue the hearing as to the uncompleted part.

At the close of the hearing, the Campus Hearing Officer may then make his/her decision or may take the matter under advisement and adjourn the meeting to a certain day at which a decision will be made.

A true copy of the decision will be given to the parent(s)/guardian in person, but where both parents are named, service on one shall be deemed notice to the other also, and the person making the service shall attach his affidavit, stating the facts of service to the original.

---

Parent/Guardian Signature

---

Date



## Confirmation of Notice for Removals

A true copy of the following documents were delivered:

- Notice of Hearing
- Notice of Representation by an Adult at the Hearing
- Hearing Procedures for Short or Long Term Removal

Student:

Parent/Guardian:

Address:

City/Zip Code:

In person, on the date of

---

Signature of Campus Behavior Coordinator  
or appropriate administrator

---

### To be verified by the Hearing Officer during the Disciplinary Hearing.

I declare that

Campus Behavior Coordinator/appropriate administrator's Signature

did give the parent(s)/guardian(s)

of

the three above documents.

---

School Principal/Hearing Officer

---

Date



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## Verification of Non-Protection under IDEA or Section 504

Campus:

Date:

After reviewing school and district records, this is to verify that  
is currently **not**:

**(Campus Behavior Coordinator/appropriate administrator verifies by checking areas that do not apply to this student)**

☐ Eligible for I.D.E.A. services

☐ Eligible for 504 services

☐ Receiving services as outlined in I.D.E.A.

☐ Receiving services as outlined in Section 504

☐ Referred for evaluation (I.D.E.A.)

☐ Referred for Evaluation (Section 504)

If a student is eligible for I.D.E.A. or Section 504, conduct a Manifestation Determination. A student that is not receiving any I.D.E.A. and/or 504 services is not protected under I.D.E.A. and/or Section 504.

\_\_\_\_\_  
Signature of Campus Behavior Coordinator  
or appropriate administrator

\_\_\_\_\_  
Title

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date



**Brownsville Independent School District**  
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## Consideration Form

☐

**Out of School Suspension**

☐

**Removal**

Student:

I.D. Number:

Campus:

Grade:

Offense:

Date of Offense:

In deciding whether to order suspension or removal to a Disciplinary Alternative Education Program, from the District campus **will** take into consideration the following factors:

1. Self-Defense (Personal) :
2. Intent or lack of intent at the time the student engaged in the conduct:
3. Student's Disciplinary History:
4. Does the student have a disability that substantially impairs his/her capacity to appreciate the wrongfulness of his/her conduct :
5. A student's status in the conservatorship of the Department of Family and Protective Services (foster care, or
6. A student's status as homeless

A thorough investigation was conducted and it indicates that  
was involved in  
The factors above did not interfere with the conduct.

**-or-**

A thorough investigation was conducted and it indicates that  
was involved in  
However, he/she

\_\_\_\_\_  
Signature of Campus Behavior Coordinator  
or appropriate administrator

\_\_\_\_\_  
Date



**Brownsville Independent School District**  
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## DISCIPLINE HEARING DECISION

**Discipline Hearing Date:**

**Discipline Hearing Location:**

**Parent/Guardian:**

**Student:**

**Address:**

**ID:**

**City, State, ZC:**

**School /Grade:**

**Infraction:**

Dear: Parent(s)/Guardian(s)

After reviewing the facts of the removal hearing held, this letter is to hereby inform you that:

☐ **REMOVAL.** Notice is hereby given that the Superintendent's Designee of the Brownsville Independent School District is delivering an **Order for the Removal** to the Brownsville Academic Center beginning on \_\_\_\_\_ for \_\_\_\_\_

Students removed to the Brownsville Academic Center must meet the removal exit requirements successfully before they can return to a BISD campus. The exit requirements for the \_\_\_\_\_ day program are: (1) meet and maintain school's discipline standards and practice in applying Boys Town Respect Model; (2) complete four (4) successful counseling sessions, and (3) recommendation of readiness to reenter home campus school setting from administration and teachers and drill sergeants.

At said hearing, it was determined that the student did engage in a serious infraction, which violated school board policy. During this removal period, it is your responsibility to supervise your child. The student is prohibited from being on school grounds or attending school-sponsored or school-related extracurricular activities during the period of removal.

Please report to BAC Administration at 8:30 a.m. to the Brownsville Academic Center located at 3308 Robindale (956)504-6305.

☐ **MODIFIED.** After reviewing the facts from the Discipline Hearing, this is to inform you that the disciplinary action recommended by the administration is hereby denied. The student is remanded back to their home campus and is assigned the following:

If you wish to appeal this administrative decision, you may do so within two (2) school days after the receipt of this letter. Your appeal must be submitted in writing to the Department of Pupil Services located at 708 Palm Blvd.

If you have any questions regarding this matter, contact the campus hearing officer at (956) \_\_\_\_\_ .

\_\_\_\_\_  
- Campus Hearing Officer

xc: \_\_\_\_\_  
- Area Assistant Superintendent  
- Principal,  
Mr. Hector Hernandez - Principal, Brownsville Academic Center

*\*For students in Special Education, the DAEP order will not be enforced until such time as the ARD committee can meet to determine if there is a manifestation determination.*



**Brownsville Independent School District**  
**Department of Pupil Services**  
708 Palm Blvd, Office #121, Brownsville, TX 78521  
Office (956) 544-3966 Fax (956) 548-8174



## **ORDER OF STUDENT REMOVAL**

STUDENT:

STUDENT ID:

CAMPUS:

PARENTS/GUARDIAN:

ADDRESS/CITY/ZC:

NOTICE is hereby given that the Superintendent's Designee of the Brownsville Independent School District is delivering an Order of Removal for \_\_\_\_\_ to the Brownsville Academic Center for \_\_\_\_\_ beginning on \_\_\_\_\_ for \_\_\_\_\_

\_\_\_\_\_  
Principal/Campus Hearing Officer Signature

Order of Removal Received by:

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

\_\_\_\_\_  
Date

If you wish to appeal this administrative decision, you may do so within two (2) school days after the receipt of this letter. Your appeal must be submitted in writing to the Department of Pupil Services at 708 Palm Blvd.

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| 1.                          | Section 504: Manifestation Determination Evaluation Results                               |
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| 2.                          | Report Card (all six weeks periods must be complete)                                      |
| 3.                          | Summary Assessment Form – Check One:                                                      |
|                             | <input type="checkbox"/> Test Hound <input type="checkbox"/> No Accommodations            |
| 4.                          | STARS Progress Reports (High School or BLA)                                               |
| 5.                          | Student Credit Count (Seniors Only)                                                       |

### Preliminary Packet Checklist

#### Special Services: Tab 3, IDEA 1-2 only

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

Approved ☐ Not Approved ☐

Administrator (signature) \_\_\_\_\_

Remarks: \_\_\_\_\_

#### Brownsville Academic Center: Tab 1-6

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

Approved ☐ Not Approved ☐

Principal (signature) \_\_\_\_\_

☐ Student may report to BAC on:

\_\_\_\_/\_\_\_\_/\_\_\_\_

☐ Returned for Corrections

Accelerated Learning Instruction  
needed in the following areas (s):

Notes: \_\_\_\_\_



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## **Aviso de Audiencia de Corto o Largo Remocion**

Estudiante:

Padres/Tutores Legal:

Dirección:

Cuidad/Codigo Postal:

Se da aviso que el designado del Superintendente del Distrito Escolar de Brownsville conducirá y tendrá una audiencia ubicada en:

el \_\_\_\_\_ empezando al la(s) \_\_\_\_\_ con el propósito de escuchar,  
considerer y actuar sobre la siguiente petición:

Remoción del medio educativo regular por un total de \_\_\_\_\_ días escolares debido a la siguiente ofensa:

AVISO: El Distrito puede conducir la audiencia aunque el estudiant, los padres del estudiante, el guardián legal o algún otro adulto representando al estudiante estén presentes o no, siempre y cuando la escuela haya hecho un esfuerzo en buena fe de informar al estudiante, los padres del estudiante o tutores legal la hora y lugar de la audiencia. 37.09(f)

\_\_\_\_\_  
Este aviso fue recibida por

\_\_\_\_\_  
Fecha



**Brownsville Independent School District**  
**Department of Pupil Services**  
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Office (956) 544-3966



## **Aviso de Representación por un Adulto en la Audiencia**

Tienen el derecho de ser asistido en una audiencia de remoción por otro adulto que no sea el padre/tutores legal. Ese adulto podrá aconsejar al estudiante pero no debe ser empleado del distrito escolar. (i.e. Un familiar, amigo, abogado, etc.)

Padres, Tutores Legal o Personas Responsables de  
he recibido, leído y cuidadosamente revisado esta declaración y entiendo su pertinencia.

\_\_\_\_\_  
Firma de Padres/Tutores Legales

\_\_\_\_\_  
Fecha

\_\_\_\_\_  
Coordinador de la Conducta de la escuela  
o administrador apropiado

Se le entrego una copia de este aviso al padre/tutores legal/persona responsable el \_\_\_\_\_.  
Fecha

\_\_\_\_\_  
Administrador de Escuela

\_\_\_\_\_  
Fecha



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## **Procedimiento de Audiencia de Corto o Largo Remoción**

El Solicitante será permitido hacer un corto informe de apertura, y puede presentar datos por testimonio verbal ó evidencia por escrito, incluyendo declaración, si desea, ó las dos.

Cuando el Solicitante haya terminado, los Demandados serán permitidos hacer un corto informe de apertura y presentar los datos por testimonio verbal, evidencia escrita, incluyendo declaraciones, si desea, ó las dos. Presentación de testigos es opcional.

Cuando el Demandado haya terminado, el Solicitante será permitido presentar una corta impugnación.

Los testigos de los Solicitantes se presentarán para declarar en persona o por escrito. El Solicitante y Demandado serán permitidos hacer preguntas directas a los otros testigos presentes cuando presenten los hechos a favor de, ó en contra de la petición.

Los acontecimientos serán grabados y los demandados pueden hacer arreglos para obtener una copia, a su propio costo ó pueden hacer su propia grabación de los acontecimientos.

Cualquier Demandado que desee ser escuchado, pero no puede estar presente en la fecha indicada puede pedir que la audiencia se aplase. Pero debe tener una buena razón y esta razón debe de ser a la satisfacción de él oficial que dirige la audiencia, y también debe ser en un día que sea de común acuerdo y este aplazamiento se permitirá solamente una vez.

Si la audiencia no ha sido completada después de un tiempo razonable, el oficial que dirige la audiencia puede aplazar la sesión para un día seguro y continuar la audiencia desde la parte incompleta.

Al final de la audiencia, el oficial que dirige la audiencia puede hacer su decisión o puede llevar el caso bajo asesoramiento o aplazar la sesión a un día seguro en el cual hará su decisión.

Una copia verdadera de la decisión será dada a los padres/guardián legal, pero cuando los dos padres son nombrados, el servicio a uno será considerado aviso al otro también.

---

Padres/Tutores Legales

---

Fecha



## **Aviso de Confirmación**

Una copia verdadera de los siguientes documentos fue entregada:

- ☐ Aviso de la Audiencia
- ☐ Aviso de Representación por un Adulto en la Audiencia
- ☐ Procedimientos de Audiencia de Corto o Largo Remoción

Estudiante:

Padres/Tutores Legal:

Dirección:

Cuidad/Codigo Postal:

En persona en la fecha:

---

Firma del Coordinador de la Conducta de la escuela  
o administrador apropiado

---

**(Para ser verificada por el oficial de la audiencia durante la audiencia disciplinarian)**

Yo declare que \_\_\_\_\_ le entrego a los padres de  
firma de Coordinador de Conducta o administrador apropiado  
los tres documentos indicados en esta forma.

---

Firma de Oficial de Audiencias



## Verificación de No-Tener Protección Bajo IDEA o Sección 504

Escuela:

Fecha:

Después de revisar los archivos de la escuela y el distrito, esto verifica que actualmente **no**:

(Administrador de la escuela verifica con colocar marca de verificación en áreas que **no** se aplican a este estudiante)

☐ Es elegible para servicios de IDEA

☐ Elegible para servicios de 504

☐ Recibe servicios de IDEA

☐ Recibe servicios de Sección 504

☐ Referido para una evaluación (IDEA)

☐ Referido para una evaluación (Sección 504)

A si es que, él/ella no es protegido (a) bajo IDEA y la Sección 504. Si es elegible para IEA o Sección 504, tenga una Determinación de Manifestación.

\_\_\_\_\_  
Firma del Coordinador de la Conducta de la escuela  
o administrador apropiado

\_\_\_\_\_  
Titulo

\_\_\_\_\_  
Imprimir Nombre

\_\_\_\_\_  
Fecha



## Forma de Consideración

☐ **Suspensión Fuera de la Escuela**

☐ **Remoción**

Estudiante:

Número del Estudiante:

Escuela:

Nivel:

Ofensa:

Fecha de Ofensa:

En decidir si debe ordenar suspension, Programa Disciplinario Alternativo o remocion, el Distrito tomara en consideración lo siguiente:

1. Defensa Propia (Personal):
2. Con intención o no, el tiempo que el estudiante participo en la conducta:
3. Historia disciplinarian del estudiante:
4. ¿el estudiante tiene una discapacidad que afecta considerablemente a su capacidad para reconocer el error de su conducta
5. La situación del estudiante encustodía del Departamento de Servicios para la Familia y de Protección (acogimiento familiar), o
6. La situación del estudiante como persona sin hogar:

Una investigación cuidadosa fue conducida y indica que  
fue involucrado en  
Los factores arriba no interfirieron con la conducta.

-0-

Una investigación cuidadosa fue conducida y indica que  
fue involucrado en  
Sin embargo, él/ella

\_\_\_\_\_  
Firma del Administrador que Investigo

\_\_\_\_\_  
Fecha



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**DECISIÓN DE AUDIENCIA DISCIPLINARIA**

**Fecha de Audiencia Disciplinaria:**

**Localización de Audiencia Disciplinaria:**

**Padre(s)/Tutor(es):**

**Estudiante:**

**Dirección:**

**ID del Estudiante:**

**Cd, Estado ,CP:**

**Escuela/ Grado:**

**Infracción:**

Estimado: Padre(s)/Tutor(es)

Después de revisar los declaraciones hechos en la audiencia, esta carta es para informarle que:

☐ **REMOCIÓN.** Se avisa que el Designado del Superintendente del Distrito Escolar Independiente de Brownsville emite una Orden de Remoción de Estudiante al Centro Académico de Brownsville y ordena la remoción empezando por

Los estudiantes que han sido removidos al Centro Académico de Brownsville deben de satisfacer los requerimientos de remoción antes de que regresen a la escuela de BISD. Los requerimientos de salida para el programa de días son: (1) cumplir y mantener las normas de disciplina de la escuela y poner por practica el “Boys Town Respect Model”; (2) completar 45 sesiones de consejo con éxito y (3) obtener una recomendación de parte de la administración y maestros que diga que está preparado para reingresar al ambiente de su escuela de origen.

Fue determinado en dicha audiencia que si participo en una infracción seria que viola la póliza de la Mesa Directiva. Durante el período de remoción, es la responsabilidad de usted de supervisar a su hijo/a. Se le prohíbe de estar en propiedades escolar o asistir actividades fuera del plan de estudios patrocinados o relacionados con la escuela durante el período de remoción.

Favor de reportar con Administracion de la escuela Centro Académico de Brownsville a las 8:30 a.m. localizado en 3308 Robindale, (956)504-6305 en la fecha especificada.

☐ **MODIFICADA.** Despues de revisar los declaraciones hechos en la audiencia disciplinaria, esta carta es para informarle que la acción disciplinaria recomendada por la administración con respecto a el estudiante es negada. El estudiate,

Si desea apelar esta decisión administrativa puede hacerlo dentro de dos (2) días escolares después de recibir esta carta. Su apelación debe de ser sometida por escrito al Departamento de Servicios para Alumnos en 708 Palm Blvd.

Si tiene alguna pregunta con respecto a esta audiencia , puede llamar el oficial de la audencia al (956)

Respetuosamente,

\_\_\_\_\_  
- Funcionario de Audencia

xc:

- Asistente de Superintendente  
- Directora de la Escuela

Sr. Hector Hernandez – Director del Centro Académico de Brownsville

*\*Para los estudiantes en educación especial, la orden DAEP no se aplicarán hasta que el Comité ARD puede reunirse para hacer una determinación de manifestación.*



**Brownsville Independent School District**  
**Department of Pupil Services**  
708 Palm Blvd, Office #121, Brownsville, TX 78521  
Office (956) 544-3966



## **ORDEN DE REMOCION DEL ESTUDIANTE**

Estudiante:

Número del Estudiante:

Escuela/Nivel:

Padres/Tutores Legal:

Dirección/Cuidad/Codigo Postal:

Por la presente se da aviso que el designado del Superintendente del Distrito Escolar Independiente de Brownsville está apoyando y ordenando de remocion

al Centro Académico de Brownsville por

---

Director/Funcionario de Audiencia

La orden de remocion fue recibida por:

---

Padre/Tutor Legal

---

Fecha

Si desea apelar esta decisión administrativa puede hacerlo dentro de dos (2) días escolares después de recibir esta carta. Su apelación debe de ser sometida por escrito al Departamento de Servicios para Alumnos en 708 Palm Blvd.

*\*For students in Special Education, the DAEP order will not be enforced until such time as the ARD committee can meet to determine if there is a manifestation determination.*

## Application Packet Checklist for ☐ 30-day Removal ☐ 45-day Removal

|                                                      |             |                                                     |                                                                    |
|------------------------------------------------------|-------------|-----------------------------------------------------|--------------------------------------------------------------------|
| Name:                                                | ID#:        | DOB:                                                | Grade:                                                             |
| Campus:                                              | Infraction: | <input type="checkbox"/> 1 <sup>st</sup> Infraction | <input type="checkbox"/> 2 <sup>nd</sup> /Subsequent Infraction(s) |
| Campus Personnel Completing File and Contact Number: |             |                                                     |                                                                    |

All removal packets require a cover page, divided by tabs, and titled accordingly with the following documents.

| TAB 1: Due Process          |                                                                                           |
|-----------------------------|-------------------------------------------------------------------------------------------|
| 1.                          | Form requesting an extension (if the hearing exceeds 7 days)                              |
| 2.                          | Notice of Hearing                                                                         |
| 3.                          | Notice of Representation                                                                  |
| 4.                          | Hearing Procedures                                                                        |
| 5.                          | Verification of Non-Protection under IDEA/504/E-School Demographics                       |
| 6.                          | Consideration Form                                                                        |
| TAB 2: Violation of SCC     |                                                                                           |
| 1.                          | Student code of conduct receipt form (Must be current Sch. Yr & signed by parent/student) |
| 2.                          | Discipline Referral                                                                       |
| 3.                          | Administrator's Statement                                                                 |
| 4.                          | Witness(es) statement(s)                                                                  |
| 5.                          | Police report, if applicable                                                              |
| 6.                          | Nurse's report                                                                            |
| TAB 3: Student Services     |                                                                                           |
| IDEA Documentation          |                                                                                           |
| 1.                          | Staffing Checklist                                                                        |
| 2.                          | FBA/BIP (current)                                                                         |
| 3.                          | IDEA: Manifestation Checklist                                                             |
| 4.                          | IDEA: Placement ARD Signature Page; ARD minutes & Schedule of Services                    |
| 504 Documentation           |                                                                                           |
| 1.                          | Section 504: Manifestation Determination Evaluation Results                               |
| 2.                          | Section 504: Behavior Intervention Plan                                                   |
| 3.                          | Section 504: Student Services Plan                                                        |
| Bilingual/ESL Documentation |                                                                                           |
| 1.                          | Bilingual / ESL LPAC Assessment Form (from Special Program Folder)                        |
| 2.                          | Individual Cumulative Report                                                              |
| 3.                          | E-schools Bilingual Screen                                                                |
| TAB 4: RTI                  |                                                                                           |
|                             | Please check one: Academic <input type="checkbox"/> Discipline <input type="checkbox"/>   |
| 1.                          | Parent Input                                                                              |
| 2.                          | Referral Information                                                                      |
| 3.                          | Teacher Input                                                                             |
| 4.                          | Behavior Intervention Plan                                                                |
| TAB 5: BAC Entry Forms      |                                                                                           |
| 1.                          | Removal letter / Order of removal (only 1 of 2)                                           |
| 2.                          | Student Registration Information Form                                                     |
| 3.                          | Entry Form                                                                                |
| 4.                          | Health Form                                                                               |
| 5.                          | Parent Letter                                                                             |
| 6.                          | Completed Physical Examination Form                                                       |
| TAB 6: Student Information  |                                                                                           |
| 1.                          | Current Schedule (If working on STARS modules provide course progress-#4 below)           |
| 2.                          | Report Card (all six weeks periods must be complete)                                      |
| 3.                          | Summary Assessment Form – Check One:                                                      |
|                             | <input type="checkbox"/> Test Hound <input type="checkbox"/> No Accommodations            |
| 4.                          | STARS Progress Reports (High School or BLA)                                               |
| 5.                          | Student Credit Count (Seniors Only)                                                       |

### Preliminary Packet Checklist

#### Special Services: Tab 3, IDEA 1-2 only

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

Approved ☐ Not Approved ☐

Administrator (signature) \_\_\_\_\_

Remarks: \_\_\_\_\_

#### Brownsville Academic Center: Tab 1-6

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

Approved ☐ Not Approved ☐

Principal (signature) \_\_\_\_\_

☐ Student may report to BAC on:

\_\_\_\_/\_\_\_\_/\_\_\_\_

☐ Returned for Corrections

Accelerated Learning Instruction  
needed in the following areas (s):

Notes: \_\_\_\_\_

## DISCIPLINE HEARING GUIDE

1. This hearing will come to order. Today is \_\_\_\_\_ . We are at \_\_\_\_\_ located at \_\_\_\_\_ . We are meeting to consider whether to remove or otherwise discipline \_\_\_\_\_ . My name is \_\_\_\_\_ , Hearing Officer and Superintendent's designee for \_\_\_\_\_ .
2. Present at this hearing today are \_\_\_\_\_ (everyone in the meeting orally presents themselves for the record).
3. Campus Behavior Coordinator or appropriate administrator's designee has provided a removal packet to the hearing officer, as well as the parent.
4. The allegation brought forth by \_\_\_\_\_ is \_\_\_\_\_ .
5. The purpose of this hearing is to consider the facts regarding this case and to consider the recommendation by campus administration to remove student \_\_\_\_\_ for \_\_\_\_\_ .
6. If you have any comments or questions, you will be given time to express your concerns at a later time during this hearing.
7. In the packet you have the Notice of Hearing (show document to parent). Is this your signature? Do you understand why you are here?
8. On the Representation Form, your signature indicates you are aware that you can be represented by an adult who is not a BISD employee. Is this your signature?
9. On the Procedures form, your signature indicates you were given a copy of the procedures that will be followed at this hearing. Is this your signature?
10. On the Confirmation form, the Campus Behavior Coordinator or appropriate administrator's signature verifies you were given the three notices that were just reviewed.
11. The Verification form for IDEA/504 students is also enclosed. (Campus Behavior Coordinator or appropriate administrator states if student is currently serviced by either IDEA or 504 programs).
12. A copy of the Acknowledgement form signed by the student and/or parent acknowledges that the (state the current school year) SCC was issued to \_\_\_\_\_ on \_\_\_\_\_. This document lists removable offenses and their consequences. (Verify parent signature and date signed also).
13. The Discipline form is part of the due process where the student is informed of the infraction and given the opportunity to write their version. Campus Behavior Coordinator or appropriate administrator reads student's statement \_\_\_\_\_ .
14. The Campus Behavior Coordinator or appropriate administrator's Statement (read by campus behavior or appropriate administrator) describes the incident and investigation. Include date, time and sequence of events. For bullying offenses, refer to the investigative report, the findings and notice form.

15. The Campus Behavior Coordinator or appropriate administrator's Removal Form
  - Discuss intent, self-defense, disciplinary history and (if applicable) if the student has a disability that substantially impairs his/her capacity to appreciate the wrongfulness of his/her conduct (State date of manifestation determination meeting and the committee decision).
16. Witness Statements (if applicable)
17. A copy of the police report was obtained from BISD Police. (state the Police report number and charge – if applicable)
18. Enclosed also is a copy of the Nurse's report which indicates student vitals on that day.
19. Opportunity given to the Campus Behavior Coordinator or appropriate administrator to discuss the infraction, as per their written statement. (Provide details of a thorough investigation). If applicable to the infraction, discuss prior history discipline referrals at this point.
20. Parent/Student – Do you have any comments or questions in relation to the infraction and/or proposed consequence? (allow Student to state his version and then allow the parent and/or adult attending the hearing with them)
21. **HEARING OFFICER DECISION.** After a brief break, hearing officer returns with a decision: choose either A or B below based on your decision:
  - A. **Decision for Removal** – Based on the evidence presented, the campus administration has demonstrated that \_\_\_\_\_ did engage in a serious infraction \_\_\_\_\_ which violated \_\_\_\_\_ school board policy. Therefore, \_\_\_\_\_ is removed from \_\_\_\_\_ to the Brownsville Academic Center (BAC) for \_\_\_\_\_ days, beginning \_\_\_\_\_. If you wish to appeal this administrative decision, you may appeal within two (2) school days upon receipt of removal order. The appeal must be submitted in writing to the Department of Pupil Services located at 708 Palm Bld. A form will be provided to write your appeal on at Department of Pupil Services. The District's Hearing Officer decision is final and non-appealable except through judicial proceedings.
    - a. **(Inform parent if applicable)** For students in Special Education, the DAEP order will not be enforced until such time as the ARD committee can meet to determine if there is a manifestation determination. For students in 504, the manifestation determination should have been held prior to the discipline hearing.
  - B. **Decision to Remain on Campus** – Based on the information presented, the decision is for \_\_\_\_\_ remain at the campus based on the following \_\_\_\_\_  
  
(state reason student is remaining on campus and if returning to regular school setting or an alternative discipline on campus such as ISS, Team Suspension, etc. )

## GUIA DE AUDENCIA DISCIPLINARIA

1. Esta audiencia empezará. Hoy es . Estamos en la escuela situada en . Estamos reunidos para considerar si removemos o utilizamos otro tipo de disciplina para .  
Mi nombre es oficial de audiencias y representante del superintendente, para la escuela
2. Presentes están (padre, estudiante, administrador de escuela o otras personas).
3. El administrador de la escuela ha proporcionado un paquete de remoción al oficial de la audiencia así como al padre.
4. La alegación traída adelante por la escuela de es .
5. El propósito de esta audiencia es considerar los hechos con respecto a este caso y considerar la recomendación por la administración de de remover a por (violación).
6. Si usted tiene comentarios o preguntas, después se le dará tiempo para expresar sus preocupaciones.
7. En el paquete usted tiene el aviso de la audiencia. ¿Es esta su firma y usted entiende porqué está aquí?
8. Su firma en la forma de representación indica que usted está enterado que puede ser representado por un adulto que no sea empleado de BISD. Es esta su firma?
9. La otra página indica que le dieron una copia de los procedimientos que serán seguidos en esta audiencia. Es esta su firma?
10. La página de confirmación verifica que le dieron los tres documentos.
11. En el paquete también encuentra una forma para los estudiantes del SPED/ 504
12. Después tenemos una copia de la aceptación de Código de Conducta firmada por el estudiante (y/o el padre) que reconoce que fue recibido el que publica las ofensas y consecuencias.
13. La forma de la disciplina es parte del proceso donde se le informa de la infracción y se le da una oportunidad a su hijo/a de escribir su versión. Voy a leer los comentarios de su hijo/a.
14. Declaraciones de los Administradores (explique el incidente y la investigación) incluya fecha, horario y secuencia de eventos. Para ofensas de bullying, referirse al reporte de investigación, los resultados y forma de notificación.
15. Declaraciones Adicional del Administrador - Discuten intento, defensa propia, historia de disciplina y incapacidad.
16. Declaraciones del Testigo.

17. Después tenemos una copia del reporte del departamento de policía de BISD.
18. También tiene una copia del informe de la enfermera que indica vitales del estudiante en ese día.
19. Administrador discute la infracción y incluye detalles de la investigación.
20. Padre/Estudiante-usted tiene algún comentario o pregunta en lo referente a la infracción y/o a la consecuencia propuesta?
  - A. De acuerdo con la evidencia presentada, la administración de la escuela ha demostrado que el estudiante \_\_\_\_\_ se involucró en una infracción seria ( \_\_\_\_\_ ) que violó la póliza del tablero de la escuela. Por lo tanto, remuevo a \_\_\_\_\_ de a Brownsville Academic Center por \_\_\_\_\_ días empezando el \_\_\_\_\_.

Si usted desea apelar esta decisión administrativa, puede hacerlo dentro de dos (2) días escolares cuando reciba la carta de la remoción con el departamento de Servicios para Alumnos ubicado en 708 Palm Blvd.

  - B. De acuerdo con la información presentada, aparece ser evidencia escasa o no hubo suficiente que \_\_\_\_\_ era involucrado en una infracción seria \_\_\_\_\_ que violó la póliza del tablero de la escuela.

Por lo tanto seguirá \_\_\_\_\_ en la escuela \_\_\_\_\_.
21. Para los estudiantes en educación especial, la orden DAEP no se aplicarán hasta que el Comité ARD puede reunirse para determinar si hay una determinación de manifestación.

El incumplimiento de la documentación adecuada en los formatos prescritos y presentados como descritos anteriormente puede acarrear al oficial de audiencia de remandar al estudiante a la configuración de escuela regular.

El oficial de audiencia de la escuela deberá informar a los padres que su decisión es apelable a los oficiales de audiencia del distrito dos días escolares, después de haber recibido la orden para la remoción.

Su apelación debe presentarse por escrito al Departamento de Servicios para Alumnos ubicado en 708 Palm Blvd. La decisión del oficial de audiencia del distrito es definitivo e inapelable excepto a través de procedimientos judiciales.

Toda la documentación debe ser presentada a los oficiales de audiencia del distrito antes del proceso de apelación.