

Renville County West Jaguars

Disciplinary Report to Parents	Student's Name:	Class-Grade:	Date:
	Date of Incident:	Time:	Teacher:

Notice to Parents

1. The purpose of this report is to inform you of a disciplinary incident involving the student.
2. You are urged to appreciate the action taken by the teacher and to cooperate with the corrective action initiated today.

Reason(s) for Referral:

- | | |
|---|--|
| <input type="checkbox"/> Abuse, Verbal
<input type="checkbox"/> Alcohol or Chemicals, Possession or Use
<input type="checkbox"/> Alcohol, Possession with Intent to Distribute
<input type="checkbox"/> Ammunition, Possession
<input type="checkbox"/> Arson
<input type="checkbox"/> Assault, Physical
<input type="checkbox"/> Assault, Verbal
<input type="checkbox"/> Assault, Aggravated
<input type="checkbox"/> Bomb Threat, False
<input type="checkbox"/> Burglary
<input type="checkbox"/> Chemicals, Possession/Intent to Distribute
<input type="checkbox"/> Dress and Grooming
<input type="checkbox"/> Driving, Careless or Reckless
<input type="checkbox"/> Explosives, Possession and/or Use
<input type="checkbox"/> Fighting
<input type="checkbox"/> Fire Alarms, False
<input type="checkbox"/> Fire Extinguisher, Unauthorized Use
<input type="checkbox"/> Fireworks, Possession | <input type="checkbox"/> Fireworks, Use
<input type="checkbox"/> Gambling
<input type="checkbox"/> Harassment, Including Sexual
<input type="checkbox"/> Insubordination
<input type="checkbox"/> Interference, Disruption or Obstruction
<input type="checkbox"/> Nuisance Devices, Possession
<input type="checkbox"/> Records or Identification Falsification
<input type="checkbox"/> Robbery or Extortion
<input type="checkbox"/> Sexual Conduct, Criminal
<input type="checkbox"/> Terroristic Threat
<input type="checkbox"/> Theft, Or Knowingly Receiving or Possessing Stolen Property
<input type="checkbox"/> Tobacco
<input type="checkbox"/> Trespassing
<input type="checkbox"/> Vehicle, Unauthorized Use
<input type="checkbox"/> Weapon or Look-Alike Weapon, Possession
<input type="checkbox"/> Willful Damage to Property (Vandalism)
<input type="checkbox"/> Other |
|---|--|

Action Taken Prior To Referral:

- | | |
|--|---|
| <input type="checkbox"/> Checked Student's Folder
<input type="checkbox"/> Held Conference with Student
<input type="checkbox"/> Consulted School Social Worker
<input type="checkbox"/> Detained Student After School
<input type="checkbox"/> Changed Student's Seat | <input type="checkbox"/> Telephone Parent
<input type="checkbox"/> Held Conference with Parent
<input type="checkbox"/> Sent Previous Report Home
<input type="checkbox"/> Other |
|--|---|

Present Action and Recommendation:

- | | |
|---|---|
| <input type="checkbox"/> Warning/Reminder
<input type="checkbox"/> Referral
<input type="checkbox"/> Detention
<input type="checkbox"/> Removal From Class | <input type="checkbox"/> Dismissal from School One Day
<input type="checkbox"/> In School Suspension
<input type="checkbox"/> Out of School Suspension
<input type="checkbox"/> Conference with Parent |
|---|---|

Comments:

Teacher's Signature:	Date:
Student's Signature:	Date:
Principal's Signature:	Date: