

Discipline Incident Form

Gadsden County Public Schools

_____ School _____

Student #	Student name	Date	Time	Teacher #	Teacher name	Location
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School incident(s) reported to Law Enforcement/SESIR:

- AR Arson
- AS Assault
- AU Alcohol, Using/ Possession
- BA Battery
- BE Breaking & Entering/Burglary
- DC Disruption on Campus/Major
- DU Drugs, Use/Sale/Possession
- EX Extortion
- SX Sexual Battery
- SG Stolen Goods, Possession
- TL Theft (Over \$250)
- TP Trespassing on School Campus
- TI Threat, Property/Student/Personnel
- VA Vandalism
- WF Weapon, Possession/Use

May not need to report to Law Enforcement:

- BU Bullying
- DE Defiance/Disrespectful
- DI Driving Infraction
- ID Disruptive
- ED Electronic Device, Usage
- FI Instigating a Fight
- FO Fighting
- FR Failure to Report as Assigned
- HA Harassment/Sexual/Verbal
- HP Horse-playing
- I1 Inappropriate, Clothing/Language/Gesture
- I2 Indecent Exposure
- LS Leaving School Grounds/Class
- TO Tobacco, Using/Possession
- TR Tardiness

Detailed Information:

A. More Serious B. Less Serious
 Drugs: M- Marijuana N- Non Controlled Substance

For Bullying related:

Victim Student ID number: _____ Basis for Bullying/Harassment(Check all that apply):
 Race Gender M F Disability

Weapon: Description _____

of weapons _____
 Student in possession of weapon(s) Yes No
 Student arrested: Yes No

(UBL) Unsubstantiated (UHR) Unsubstantiated

* Use these codes for incidents reported as BUL or HAR, that once investigated, do not meet the definition of BUL or HAR.

Reported By: _____

Parental Contact

Parent Notification: Personal Contact Phone Message Written Communication

Name of Parent/Guardian: _____ Phone: _____

Notes: _____

Administrative Use Only

Administrative Disposition:

- | | | |
|--|--|--|
| <input type="checkbox"/> BR Bus Suspension | <input type="checkbox"/> DN Assigned Detention | <input type="checkbox"/> EX School Expulsion |
| <input type="checkbox"/> BS Ban from School Activities | <input type="checkbox"/> DO Work Detail | <input type="checkbox"/> IS In-School Suspension |
| <input type="checkbox"/> DF No Action Taken | <input type="checkbox"/> DP Parent Conference | <input type="checkbox"/> LP Alternative Placement |
| <input type="checkbox"/> DJ Placed in Time-Out | <input type="checkbox"/> DS Saturday Detention | <input type="checkbox"/> OS Suspension from School |

Number of Days: _____

Beginning Date: _____

Return Date: _____

ESE Student: If the student has received more than ten days of suspension during the current school year a manifestation meeting is required for this student.

meeting is required within 10 days.

Comment: _____

Action by: _____ Date: _____ Time: _____ Witness: _____

Principal / Asst principal / Dean: _____

Copies: White-Parents Canary-Teacher Pink-Office Gold-Bus Driver