**Person Originating the Referral: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **INCIDENT INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date \_\_\_/\_\_\_/\_\_\_\_\_ | | | Time \_\_\_:\_\_\_ am/pm | | | | | | | | | | | | Number(s) involved \_\_\_\_ | | | | | | | | | Serious Bodily Injury: ❑ Yes ❑No | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | **Incident Category** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| ❑ | Tardiness Or Truancy | | | | | | ❑ | | | Disrespectful/ Inappropriate Conduct | | | | | | | | | | ❑ | | | | Aggressive Conduct | | | | | | | | | | | | | ❑ | | | Weapons | | |
| ❑ | Failure To Obey Rules/ Authority | | | | | | ❑ | | | Legal Concerns | | | | | | | | | | ❑ | | | | Illegal Drugs/ Substances | | | | | | | | | | | | |  | | |  | | |
|  | | | | | | | | | | | | | **Location** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| ❑ | Athletic Field | | | ❑ | | Bus | | | | | | | | | | ❑ | Gym | | | | | | | | ❑ | | | | | | Playground | | | | | | | | | | | |
| ❑ | Auditorium | | | ❑ | | Cafeteria | | | | | | | | | | ❑ | Hall/ Breeze Way | | | | | | | | ❑ | | | | | | Parking Lot | | | | | | | | | | | |
| ❑ | Bathroom/ Restroom | | | ❑ | | Classroom | | | | | | | | | | ❑ | Locker Room | | | | | | | | ❑ | | | | | | Shop Area | | | | | | | | | | | |
| ❑ | Bus Loading Zone | | | ❑ | | Computer Lab | | | | | | | | | | ❑ | Library | | | | | | | | ❑ | | | | | | Special Event/ Assembly/ Field Trip | | | | | | | | | | | |
| ❑ | Bus Stop | | | ❑ | | Commons/ Common Areas | | | | | | | | | | ❑ | Office | | | | | | | | ❑ | | | | | | Stairwell | | | | | | | | | | | |
| **COMPLETE THE FOLLOWING INFORMATION FOR EACH PERSON INVOLVED IN THE INCIDENT**  **Use separate sheets for each person. All sheets completed for a single incident should be stapled together.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Person Number \_\_** | | | | | **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | **Role?** | | ❑ | | Peer | | | ❑ | | | | Staff | | | ❑ | Student | | ❑ | | Substitute | | | ❑ | Other |
| **Behaviors Exhibited** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **You may indicate up to THREE behaviors for each person involved as follows:**  **P = Primary (Most Severe) Behavior S = Secondary Behavior A = Additional Behavior** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \_\_\_\_ Involved as non-offender or target  \_\_\_\_ Cheating  \_\_\_\_ Deceit  \_\_\_\_ Disruptive/Disrespectful Conduct  \_\_\_\_ Failure to Serve Detention  \_\_\_\_ Falsifying Identity  \_\_\_\_ Inappropriate Appearance  \_\_\_\_ Inappropriate Display of Affection  \_\_\_\_ Inappropriate Language  \_\_\_\_ Possession of Inappropriate Personal Property  \_\_\_\_ Skipping Class  \_\_\_\_ Tardiness  \_\_\_\_ Vehicle Parking Violation  \_\_\_\_ Gang Related Activity  \_\_\_\_ Habitual Violation of School Rules or Policies  \_\_\_\_ Insubordination | | | | | | | | | | | \_\_\_\_ Leaving School Without Permission  \_\_\_\_ Physical Fight Without Injury  \_\_\_\_ Possession of Imitation Weapon  \_\_\_\_ Possession of Knife not meeting Dangerous Weapon Definition (West Virginia Code §61-7-2)  \_\_\_\_ Profane Language/ Obscene Gesture/ Indecent Act Toward An Employee or A Student  \_\_\_\_ Technology Misuse  \_\_\_\_ Battery Against a Student  \_\_\_\_ Defacing School Property/ Vandalism  \_\_\_\_ False Fire Alarm  \_\_\_\_ Fraud/Forgery  \_\_\_\_ Gambling  \_\_\_\_ Hazing  \_\_\_\_ Improper or Negligent Operation of a Motor Vehicle  \_\_\_\_ Larceny  \_\_\_\_ Sexual Misconduct | | | | | | | | | | | | | | \_\_\_\_ Threat of Injury/Assault Against An Employee or A Student  \_\_\_\_ Trespassing  \_\_\_\_ Harassment/Bullying/Intimidation  \_\_\_\_ Imitation Drugs: Possession, Use, Distribution or Sale  \_\_\_\_ Inhalant Abuse  \_\_\_\_ Possession/Use of Substance Containing Tobacco and/or Nicotine  \_\_\_\_ Battery Against a School Employee  \_\_\_\_ Felony  \_\_\_\_ Possession and/or Use of Dangerous Weapon  \_\_\_\_ Illegal Substance Related Behaviors (Check which below):  \_\_\_\_ Use/Possession of Illicit Drugs  \_\_\_\_ Use/Possession of Alcohol  \_\_\_\_ Sale of a Narcotic | | | | | | | | | | | | | | | | | |
| Was Restraint Required for this Person? | | | | | | | | ❑ Yes ❑No | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | | | | | |
| This offense reflects a need for intervention for which of the School and Community Social Skill Standards? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ❑ Self-awareness and Self-management | | | | | | | | | | | | ❑ Social-awareness and Interpersonal Skills | | | | | | | | | | ❑Decision-making Skills and Responsible Behaviors | | | | | | | | | | | | | | | | | | | | |
| Comments: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Interventions** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **You may indicate up to TWO Interventions each person as follows: P = Primary Action S = Secondary Action** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \_\_\_\_ No action warranted  \_\_\_\_ Administrator/student conference or reprimand  \_\_\_\_ Teacher/student conference or reprimand  \_\_\_\_ Administrator and teacher-parent/guardian conference  \_\_\_\_ Teacher parent contact  \_\_\_\_ Academic sanctions  \_\_\_\_ Counseling referrals and conference to support staff or agencies  \_\_\_\_ Daily/weekly progress reports  \_\_\_\_ Behavioral contracts  \_\_\_\_ Referral to IEP Team | | | | | | | | | | | \_\_\_\_ Referral to medical or mental health service  \_\_\_\_ Referral to support staff/ counseling/ other therapeutic services  \_\_\_\_ Referral to a tobacco cessation program  \_\_\_\_ Change in the student's class schedule  \_\_\_\_ School service assignment  \_\_\_\_ Confiscation of inappropriate item  \_\_\_\_ Revocation of privileges  \_\_\_\_ Restitution/restoration  \_\_\_\_ Detention – lunch  \_\_\_\_ Detention - before school  \_\_\_\_ Detention - after school  \_\_\_\_ Denial of participation in class and/or school activities | | | | | | | | | | | | | | | | | | \_\_\_\_ Immediate exclusion by teacher from the classroom  \_\_\_\_ Voluntary weekend detention  \_\_\_\_ In-school suspension  \_\_\_\_ Law enforcement notification  \_\_\_\_ Placement of student w/disability to Interim Alt. Ed. by school personnel  \_\_\_\_ Placement of student w/ disability to Interim Alt. Ed. by WVDE Due Process Hearing Officer  \_\_\_\_ Placement of student to Alt. Ed. Setting  \_\_\_\_ Out-of-school suspension  \_\_\_\_ Recommended Expulsion | | | | | | | | | | | | | |
| **Primary**: Start Date: | | \_\_\_/\_\_\_/\_\_\_\_\_ | | | | | | | End Date | | | | | \_\_\_/\_\_\_/\_\_\_\_\_ | | | | **Secondary:** Start Date: | | | | | | | | | | \_\_\_/\_\_\_/\_\_\_\_\_ | | | | | | | End Date | | | | \_\_\_/\_\_\_/\_\_\_\_\_ | | | |
| **Duration: \_\_\_\_\_\_\_\_\_ Days** | | | | | | | | | | | | | | | | | | **Duration: \_\_\_\_\_\_\_\_\_ Days** | | | | | | | | | | | | | | | | | | | | | | | | |
| Comments | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |