

PBIS Classroom Minor Behavior Tracking Form

School Personnel: Use this form to allow the student 4 chances to correct behavior before sending to the office for disciplinary action. Interventions are *suggested* but the teacher may use best judgment and document the course of action taken by crossing through the suggested intervention and documenting the one used. Use same form until complete. Each teacher should have one form per student.

Referring Teacher: _____ Date: _____ Class: _____ 504: Y/N
 Student Name: _____ School: _____ ESS: Y/N
 Student Number _____ Age _____ Gender: M / F Grade: _____ Race _____

1. Class/Lesson Disruption: Sounds, Drumming, Tapping, Excessive Talking	9. Refusing to Follow Directions/Assigned Work
2. Disrespect: Talking Back, Mocking, Gestures	10. Taking Other's Property
3. Dress Code/Uniform Violation	11. Tardy: Class/School
4. Inappropriate Language	12. Teasing/Name-calling/Harassment/Bullying
5. Out of Seat	13. Materials not brought to class
6. Disturbing Others: Pushing/Pulling/Shoving/Horseplay	14. Forgery/Cheating on assigned work
7. Possessing Prohibited Item(s)	15. Eating or drinking in class
8. Property/Equipment Misuse/Technology Devices	16. Other

Provide incident location, if other than classroom:

Possible Motivations:

- | | | | |
|--------------------------|---------------------------|-----------------|----------------|
| 1. Avoid Adult Attention | 3. Obtain Peer Attention | 5. Avoid task | 7. Do not know |
| 2. Avoid peer Attention | 4. Obtain Adult Attention | 6. Obtain Items | 8. Other _____ |

Others Involved:

- | | | | |
|----------|------------|---------------|----------------|
| 1. None | 3. Staff | 5. Substitute | 7. Other _____ |
| 2. Peers | 4. Teacher | 6. Unknown | |

Other Possible Interventions:

- | | | | |
|----------------------|---------------------------|----------------------------|------------------------|
| * Student Conference | 5. Phone Parent | 9. Curricular Modification | 13. Extra Time on Task |
| * Student Contract | 6. Time Out | 10. Social Skills Class | 14. Verbal Cues |
| * Seating Change | 7. Loss of Item/Privilege | 11. Peer Mediation | 15. Counselor Consult |
| * Recovery in Room | 8. Loss of Recess | 12. Buddy Instruction | 16. Lunch Isolation |

<u>Date of Offense</u>	<u>Type of Offense (#)</u>	<u>Suggested Intervention</u>	<u>Others Involved</u>	<u>Possible Motivation</u>	<u>Student Signature</u>
1. _____	_____	Verbal Warning	_____	_____	_____
2. _____	_____	Model and re-teach expected behavior	_____	_____	_____
3. _____	_____	Student/Teacher Conference	_____	_____	_____
4. _____	_____	Self-Reflection Sheet and Parental Contact via _____	_____	_____	_____
5. _____	_____	Parental Contact	_____	_____	_____

_____ was contacted after the fourth offense on (Date) _____ at (Time) _____ and informed that offense number five will result in an office referral with school-based consequences such as TOR, In-School Suspension, or out-of-school suspension.

Office Discipline Referral: This Classroom behavior tracking form is to accompany the student to the office with the Behavior Report.

Parent(s)/Guardian: We respectfully request your support to resolve the problem behavior(s) indicated on this form. This form is used to document classroom behavior incidents. The student has been given a warning, re-taught the expectation(s), and specific rule(s) concerning the incidents. THIS IS NOT A REFERRAL. However, the continuation of the behavior may result in an office disciplinary referral.