



Guam Department of Education
Office Discipline Referral (Secondary)

Student Name:		Grade:	COMMUNICATION LOG (Clerical Staff Only)				
Reporting Person:		() Teacher () Staff () Other	Parent/Guardian:				
Administrator:			Contact Numbers: (H) (W) (C)				
Date:	Time:	Location of Incident:	<input type="checkbox"/> Student Hand Carried				
Incident Notes:			<input type="checkbox"/> Delivered By:				
			Attempt	Date	Time	Contacted	Name
			1			Y / N	
			2			Y / N	
			3			Y / N	

FUNCTION OF BEHAVIOR:		<input type="checkbox"/> Obtain Items/Activities	<input type="checkbox"/> Avoid Adult(s)	Others involved:	<input type="checkbox"/> None	<input type="checkbox"/> Peers	<input type="checkbox"/> Teacher
<input type="checkbox"/> Obtain Peer Attention	<input type="checkbox"/> Avoid Tasks/Activities	<input type="checkbox"/> Other		<input type="checkbox"/> Substitute	<input type="checkbox"/> Staff	<input type="checkbox"/> Other:	
<input type="checkbox"/> Obtain Adult Attention	<input type="checkbox"/> Avoid Peer(s)						

TEACHER/STAFF SECTION				ADMINISTRATION SECTION	
LVL	Discipline SubType/Problem Behavior	PwSch Code	SWIS	INTERVENTION/CONSEQUENCE ASSIGNED <i>Refer to District Discipline-Truancy Manual for Details</i>	
LEVEL 1 OFFENSES	<input type="checkbox"/> 4 Minor Classroom Infractions (IR-FI Required)	INFRT.4	Othr Behvr	<input type="checkbox"/> Conference with Student (3)	
	<input type="checkbox"/> Abusive Language/Gestures/Profanity	02	InappLang	<input type="checkbox"/> Parent Contact (4) Date: Time:	
	<input type="checkbox"/> Disruptive Behavior	07	Disrupt	<input type="checkbox"/> Select one of the following:	
	<input type="checkbox"/> Tardy (3 Unexcused) (BP 411)^	08	Tardy	() Warning (14) or () Reprimand (15) or () Loss of Privileges (2) Date:	
	<input type="checkbox"/> Dress Code Violation^ (BP 401)/ Bag Policy^ (BP401.1)	12	Dress	<input type="checkbox"/> 3-5 Days Student Placed on Contract (23)	
	<input type="checkbox"/> Endangers: Horse playing/Sparring	23	Disruption	From: To:	
	<input type="checkbox"/> Technology Violation^	39	TechVio	Referral to Counselor (13) Date:	
	<input type="checkbox"/> Found Off-Limits Area	64	Out of Bounds	<input type="checkbox"/> 1-3 Days: () Detention (80) or () Work Detail (24)	
	<input type="checkbox"/> Littering	75	Def/Disrsp	From: To:	
	<input type="checkbox"/> Inappropriate Physical Contact	82	Disrespect	<input type="checkbox"/> Other Codes: (use only interventions/consequences in the DDD):	
<input type="checkbox"/> Public Display of Affection	85	InappDisAff	Specify Code		
LEVEL 2 OFFENSES	<input type="checkbox"/> 3 Level 1 Infractions	3.LEVEL.1	Othr/Behvr	<input type="checkbox"/> 3-5 Days: () Lunch Detention (80) or () Work Detail (24)	
	<input type="checkbox"/> Physical Aggression	03	PhyAgg	From: To:	
	<input type="checkbox"/> Defiance/Disrespect/Insubordination	04	Def/Disrsp	Mandatory Parent Conference (17) Date: Time:	
	<input type="checkbox"/> Deceptive Behavior	05	Lying/Cheat	Referral to Counselor (13) Date:	
	<input type="checkbox"/> Property Damage	10	PropDam	() 3 Weeks Student Placed on Contract (23) From: To:	
	<input type="checkbox"/> Theft	11	Theft	<input type="checkbox"/> 5-10 Days: () Lunch Detention (80) or () Work Detail (24)	
	<input type="checkbox"/> Instigating a Fight	24	Disrupt	From: To:	
	<input type="checkbox"/> Use/Poss./Distribution of Contraband	43	Combust	() Referral to Counselor (13) Date:	
	<input type="checkbox"/> Reckless Conduct ^Ω	50	PhyAgg	() 3 Weeks Student Placed on Contract (23) From: To:	
	<input type="checkbox"/> Forgery	62	Forgery	<input type="checkbox"/> 1-3 Days: () Parent Shadowing (48) () Suspension (27-29)	
	<input type="checkbox"/> Gambling	63	PropMisuse	() In School Suspension (37-39)	
	<input type="checkbox"/> Use/Poss./Distribution of Unauthorized Medium	71	Vandalism	From: To: Return:	
	<input type="checkbox"/> Obscenity	84	Harass/Bully	() Referral to Counselor (13) Date:	
	<input type="checkbox"/> Skipping	99	Skip	() 4 Weeks Student Placed on Contract (23) From: To:	
	<input type="checkbox"/> Academic Dishonesty	AD	Lying/Cheat	() Mandatory Parent Conference (17) Date: Time:	
LEVEL 3 OFFENSES <small>Write in Problem Behavior and Code/ Note: Use Only Problem Behavior and Codes in DDD</small>	<input type="checkbox"/> 3 Level 2 Infractions	3.LEVEL.2	Othr/Behvr	<input type="checkbox"/> Other Codes: (use only interventions/consequences in the DDD): Specify Code	
	<input type="checkbox"/> Bullying Ω	06	Harass/Bully	<input type="checkbox"/> 3-10 Days: () Parent Shadowing (48) () Suspension (29-36)	
	<input type="checkbox"/> Cyber-bullying Ω	09	Harass/Bully	() In School Suspension (39-46)	
	<input type="checkbox"/> Use/Poss./Distribution of Tobacco Products^ (BP430)	13	Tobacco	From: To: Return:	
	<input type="checkbox"/> Use/Poss./Distribution of Alcohol Products^ Ω	14	Alcohol	() Mandatory Parent Conference (17) Date: Time:	
	<input type="checkbox"/> Use/Poss. of Combustibles	15	Combust	() Referral to Counselor (13) Date:	
	<input type="checkbox"/> Vandalism Property Damage	16	Vandalism	() 4 Weeks Student Placed on Contract (23) From: To:	
	<input type="checkbox"/> Terroristic Conduct^ Ω	17	BombTht	<input type="checkbox"/> 5-10 Days: () Parent Shadowing (48) () Suspension (31-36)	
	<input type="checkbox"/> Arson Property Damage^ Ω	18	Arson	() In School Suspension (41-46)	
	<input type="checkbox"/> Use/Poss./Distribution of Weapons ^ Ω	19	Weapons	From: To: Return:	
	<input type="checkbox"/> Intoxication^	20	Alcohol	() Mandatory Parent Conference (17) Date: Time:	
	<input type="checkbox"/> Endangers: Fighting^ Ω	22	Fight	() Referral to Counselor (13) Date:	
	<input type="checkbox"/> Assault/Battery^ Ω	26	Fight	() 6 Weeks Student Placed on Contract (23) From: To:	
	<input type="checkbox"/> Assault/Battery to Employee^ Ω	27	Fight	<input type="checkbox"/> 10 Days: () Parent Shadowing (48) () Suspension (36)	
	<input type="checkbox"/> Endangers: Rioting (4 or more individuals)^ Ω	29	Fight	From: To: Return:	
	<input type="checkbox"/> Use/Poss./Distribution of Drugs^ Ω	40	Drugs	() Mandatory Parent Conference (17) Date: Time:	
	<input type="checkbox"/> Use/Poss./Distribution of Inhalants	42	Drugs	() Referral to Counselor (13) Date:	
	<input type="checkbox"/> Extortion	54	Harass/Bully	() 8 Weeks Student Placed on Contract (23) From: To:	
	<input type="checkbox"/> Use/Poss./Distribution of Firearms/Explosives^Ω (BP425)	58	Combust	DAC Hearing (25) : Date: Time:	
	<input type="checkbox"/> Graffiti Property Damage	70	PropDam	<input type="checkbox"/> Other Codes: (use only interventions/consequences in the DDD):	
	<input type="checkbox"/> Sexual Harassment	80	Harass/Bully	Specify Code	
	<input type="checkbox"/> Sexual Assault^ Ω	81	Harass/Bully	Referral to Other Agency (22) Specify:	
	<input type="checkbox"/> Left Campus without Permission	95	Out of Bounds	Service Call #: Case #:	
	<input type="checkbox"/> Intimidation Ω	06A	Harass/Bully	Police Officer Name:	
	<input type="checkbox"/> Harassment Ω	06B	Harass/Bully		
	<input type="checkbox"/> Sexting Ω	09A	Harass/Bully		
	<input type="checkbox"/> Other:				

(^) Carrot symbol indicates offense follows a different schedule; reference SCPM for guidance for specific procedures.
(Ω) Ohm/upside-down horseshoe indicates offense warrants a report to Guam Police Department; reference SCPM for guidance for specific procedures.
(*) Asterisk indicates offense that results in an automatic 10-day suspension and a possible DAC Hearing.

Parent Shadowing may be used in lieu of suspension. If a student is assigned parent shadowing, he/she is NOT authorized on campus without the parent/guardian present at all times. If the parent/guardian is unable to shadow, the student must stay home for the duration of the consequence. Any student on parent shadow/suspension found on campus without authorization from the administration may be charged with criminal trespassing. During the time of parent shadow/suspension, a parent conference with the school administrator is required. Failure of the parent to adhere to this policy may result in a Persons in Need of Services (PINS) petition to Family Court for Educational Neglect. Board Policy 405 guides all suspensions. The consequences in each level are progressive in nature School Administrators have the discretion to decide consequence; other incidences/consequences are allowable in respective levels.

Administrator's Signature

Date

Student's Signature

Date

Parent's Signature

Date



Guam Department of Education
Minor/Incident Reporting (Secondary)

School: _____

Student Name: _____ Grade: _____ Room: _____

Teacher/Staff Name: _____ Subject: _____

1 st INCIDENT - Teacher/Staff/School Personnel Intervention:			
Date: _____ Time: _____ Location: _____ Function of Behavior (Refer to front for listing) _____			
<div>Minor Incidents:</div> <div><div><input type="checkbox"/> Disrespect</div><div><input type="checkbox"/> Defiance</div><div><input type="checkbox"/> Disruption</div><div><input type="checkbox"/> Physical Contact/Physical Aggression</div><div><input type="checkbox"/> Tardy</div><div><input type="checkbox"/> Inappropriate Language</div><div><input type="checkbox"/> Property Misuse</div><div><input type="checkbox"/> Dress Code Violation</div><div><input type="checkbox"/> Technology Violation</div></div> <div>Student warning/counseling Date: _____</div> <div>Parent called: Date: _____ Time _____ Phone: _____ Other: _____</div> <div>Comments (Log Entry Text Field)</div>			
Student Signature _____		Date _____	
Teacher/Staff Signature _____		Date _____	
2 nd INCIDENT - Teacher/Staff/School Personnel Intervention:			
Date: _____ Time: _____ Location: _____ Function of Behavior (Refer to front for listing) _____			
<div>Minor Incidents:</div> <div><div><input type="checkbox"/> Disrespect</div><div><input type="checkbox"/> Defiance</div><div><input type="checkbox"/> Disruption</div><div><input type="checkbox"/> Physical Contact/Physical Aggression</div><div><input type="checkbox"/> Tardy</div><div><input type="checkbox"/> Inappropriate Language</div><div><input type="checkbox"/> Property Misuse</div><div><input type="checkbox"/> Dress Code Violation</div><div><input type="checkbox"/> Technology Violation</div></div> <div>Student warning/counseling Date: _____</div> <div>Parent called: Date: _____ Time _____ Phone: _____ Other: _____</div> <div>Comments (Log Entry Text Field):</div>			
Student Signature _____		Date _____	
Teacher/Staff Signature _____		Date _____	
3 rd INCIDENT - Teacher/Staff/School Personnel Intervention:			
Date: _____ Time: _____ Location: _____ Function of Behavior (Refer to front for listing) _____			
<div>Minor Incidents:</div> <div><div><input type="checkbox"/> Disrespect</div><div><input type="checkbox"/> Defiance</div><div><input type="checkbox"/> Disruption</div><div><input type="checkbox"/> Physical Contact/Physical Aggression</div><div><input type="checkbox"/> Tardy</div><div><input type="checkbox"/> Inappropriate Language</div><div><input type="checkbox"/> Property Misuse</div><div><input type="checkbox"/> Dress Code Violation</div><div><input type="checkbox"/> Technology Violation</div></div> <div>Student warning/counseling Date: _____</div> <div>Parent called: Date: _____ Time _____ Phone: _____ Other: _____</div> <div>Comments (Log Entry Text Field):</div>			
Student Signature _____		Date _____	
Teacher/Staff Signature _____		Date _____	
4 th INCIDENT - Teacher/Staff/School Personnel Intervention:			
Date: _____ Time: _____ Location: _____ Function of Behavior (Refer to front for listing) _____			
<div>Minor Incidents:</div> <div><div><input type="checkbox"/> Disrespect</div><div><input type="checkbox"/> Defiance</div><div><input type="checkbox"/> Disruption</div><div><input type="checkbox"/> Physical Contact/Physical Aggression</div><div><input type="checkbox"/> Tardy</div><div><input type="checkbox"/> Inappropriate Language</div><div><input type="checkbox"/> Property Misuse</div><div><input type="checkbox"/> Dress Code Violation</div><div><input type="checkbox"/> Technology Violation</div></div> <div>Student warning/counseling Date: _____</div> <div>Parent called: Date: _____ Time _____ Phone: _____ Other: _____</div> <div>Comments (Log Entry Text Field):</div>			
Student Signature _____		Date _____	
Teacher/Staff Signature _____		Date _____	
ADDITIONAL INFORMATION/COMMENTS/OBSERVATIONS (Information In This Section is inputted in Log Entry Text Field)			