Form JCDA-7

**ADMINISTRATIVE REFERRAL FORM**

**ELEMENTARY SCHOOL**



*Empowering Dreams for the Future*

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| **Student’s Name:** |  | **CCSD ID#** |  | **Grade:** |  | **Homeroom Teacher:** |  |

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| **Contact Information:** | |  | | | **Parent/Guardian Contacted:** |  |
|  | | **(Parent/Guardian Name)** | | |  | **(Date/Time)** |
| **Primary Phone:** |  | | **Alternate Phone:** |  | | **Message Left: Y N** |
|  | **Circle One: Home Work Cell** | |  | **Circle One: Home Work Cell** | |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **Date of Incident:** |  | | **Time:** |  | **Location:** |  |
| **Description of Infraction:** | | **X** | | | | |
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***In regards to this referral, specify the date of any previous strategies/interventions. Include all that apply.***

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| **Student/Teacher Conference** | | |  | **Phone Contact with Parent** | |  | **Detention** |  | | | |
| **Changes Seating Arrangements** | | |  | **Parent/Teacher Conference** | |  | **Referred to Counselor** | | |  | |
| **Written Notification to Parent** | | |  | **Denied Privileges** |  | | **Referred to Administrator** | | | |  |
| **Other:** |  | | | | | | | | | | |
| **Referring Teacher:** | |  | | | | | | | **Date:** | |  |
|  | | **Print Name Signature** | | | | | | |  | |  |

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| **ADMINISTRATION USE ONLY** |  | | **CSIS Location Code (e.g. 11 [During School Hours/On School Grounds/ On Campus],**  **13 [ During School Hours. School-Sponsored Activity/Transportation]):** | | | | | | | | | | | | |  | | |  | **Additional OCR Reporting**  🞎 **Police were notified** 🞎 **Student was arrested**  🞎 **Restraint was used If so, Physical or Mechanical?** | | | | | | | | | | |  | |
|  | |  | | | | | | | | | | | | | | | |  | |
|  | **Student Code of Conduct Violation(s) (e.g. G1, H2, L2):** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | |
|  | **State Incident Types(s) (e.g. 11291, 10061, 11457):** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | |
|  | | **Administrative Action:** | | 🞎 **Conference With Student (50130)** | | | | | | | 🞎 **Warning (50132)** | | | | | | | | | 🞎 **Referred back to Teacher (50113)** | | | | | | | | | |  | |
|  | |  | | 🞎 **Time Out (50083)** | | | | | | | 🞎 **Placed in Alternative Setting by Admin (50027)** | | | | | | | | | | | | | | | |  | | |  | |
|  | | 🞎 **Other (include Action Code):** | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | 🞎 **Administrative Detention (50100) – Date(s):** | | | | | |  | | | | | **Time:** | | |  | | | | | | | **Location:** | | |  | | | |  | |
|  | | 🞎 **In-School Isolation (50026):** | | | **Number of Days: 1 2 3 4 5** | | | | | | | **Beginning Date:** | | | | | **/ /** | | | | | | | **Ending Date:** | | | | **/ /** | |  | |
|  | | 🞎 **Out-of-School Suspension (51201):** | | | | | **Number of Days:** | | **1 2 3 4 5**  **6 7 8 9 10** | | | | | **Beginning Date:** | | | | | | | **/ /** | | | | | **Ending Date:** | | | **/ /** | |  |
|  | | 🞎 **Long-term Recommendation (include Action Code[s]):** | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  |
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|  | | **Administrative Notes:** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | | **Continuation of Services?** 🞎 **Yes** 🞎 **No** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | **Name of Parent/Guardian Contacted:** | | | |  | | | | | | | | | | | | | | | | **Date/Time:** | | |  | | | | | |  |
|  | | **Method (indicate all that apply):** 🞎 **Meeting/Conference** 🞎 **Phone Call (Message Left: Y N)** 🞎 **E-mail** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |

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| **Student Signature:** |  | | | **Date:** |  |
| **Administrator Signature:** | |  | | **Date:** |  |
| **Parent/Guardian Signature:** | | |  | **Date:** |  |

White – School Yellow – Teacher Pink – Parent