INCIDENT/ REFERRAL/ SWIS REPORT

Student name _____ Grade _____ Classroom teacher_____

Reporting staff_____ Date___/____/____ Time of incident_____

☐ **Classroom managed** (Incident captured in SWIS data system only)

☐ **Administration managed*** (School administrator notified and behavior incident included in student file)

**Notify administration when any of the following occurs due to student behavior*

• Physical intervention required (complete a BER report) • Call to law enforcement (complete a BER report) • Suspension (in-school or out of school) • Elopement off school property	• Unsafe situation and/or injury to the student or others • Student is involuntarily separated from peers for more than 60 minutes • Property destruction

For each category below, check all applicable and CIRCLE the most important – *only one can be entered in SWIS*

LOCATION			OTHERS INVOLVED	
☐ Classroom	☐ Culinary	☐ Blacktop	☐ Teacher	☐ None
☐ Hallway	☐ Weight room	☐ Off campus	☐ Peers	☐ Unknown
☐ Playground	☐ Bathroom	☐ Unknown	☐ Staff	☐ Other
☐ Office	☐ Bus	☐ Other _____	☐ Substitute	
☐ Gym	☐ Parking lot			

PERCEIVED MOTIVATION		
☐ Obtain peer attention	☐ Avoid adult attention	☐ Unknown
☐ Obtain adult attention	☐ Obtain a preferred item or activity	☐ Other _____
☐ Avoid peer attention	☐ Avoid a task or activity	

STUDENT BEHAVIOR		ACTION TAKEN	
☐ Defiance ☐ Disrespect ☐ Inappropriate or abusive language ☐ Disruption ☐ Technology violation ☐ Inappropriate display of affection ☐ Bullying ☐ Harassment ☐ Threatening behavior ☐ Physical aggression	☐ Fighting ☐ Property misuse ☐ Property damage ☐ Theft ☐ Tardy ☐ Out of area/elopement ☐ Use/possession of nicotine ☐ Use/possession of alcohol ☐ Use/possession of restricted substances ☐ Use/possession of weapons ☐ Other behavior not Listed (explain): _____ _____	☐ Restorative practice ☐ Loss of privilege ☐ Restitution ☐ Time out ☐ Support room** (see below) ☐ Conference with student ☐ Caregiver contact ☐ Police called (& responded)	☐ Detention ☐ In-school suspension ☐ Out-of-school suspension (Ed Code# _____) (Dates ___/___ to___/___) ☐ Bus suspension ☐ Alternative to suspension (Ed Code# _____) ☐ Action pending ☐ Other (explain) _____ _____

ADMINISTRATION MANAGED INCIDENTS ONLY:

Describe the incident

Support room use (if applicable)

Time in: _____ Time out: _____ Name of staff present with student: _____

Teacher signature_____ Date __/___/___

Administrative reviewer _____ Date __/___/___ ☐ Incident Report ☐ Referral