

KiBe Elementary School
Make Your Day
"Social Responsibility Program"

STEP 4/5 Conference Referral – Send to office with student being referred.

Student:	Date:
Referred by:	Teacher:
Location Step 4 Chosen:	
Reason:	
<input type="checkbox"/> Escalating STEP 4 – Explanation: STEP 1: _____ STEP 2: _____ STEP 3: _____	
<input type="checkbox"/> Automatic STEP 4: (Check all that apply): <input type="checkbox"/> Profanity Directed at Another Person <input type="checkbox"/> Physically Dangerous Behavior <input type="checkbox"/> Does Not Come to a Staff Member When Requested <input type="checkbox"/> Does Not or Falsely Identifies Self to Staff Member <input type="checkbox"/> Other: _____	
This incident:	
<input type="checkbox"/> Was witnessed by adult referring <input type="checkbox"/> Was admitted to by student	
Buddy Room Location: _____ Parent/Guardian/Emergency Contact Made: Time Called: _____ Time Coming: _____ Left Message: _____	
Conference Results:	
Parent came in for conference at (Time/Date): _____ <input type="checkbox"/> Student returned to class <input type="checkbox"/> Parent chose to take child home	
Administrative Action / Comments:	
<input type="checkbox"/> STEP 5 – Date Returning: _____ Comments: _____	