

**Muskegon Catholic Central ~ Gr. K-6  
Aggressive & Non-Aggressive Behavior Report**

<b>STUDENT'S NAME</b>	<b>GRADE</b>	<b>DATE</b>
<b>DATE and LOCATION OF OFFENSE</b>	<b>WITNESSED BY</b>	<b>REPORTING STAFF MEMBER</b>

<p align="center"><b><u>AGGRESSIVE BEHAVIOR</u></b> (see Rubric on reverse side)</p> <p><input type="checkbox"/> Tier One Violation  <input type="checkbox"/> Tier Two Violation  <input type="checkbox"/> Tier Three Violation  <input type="checkbox"/> Tier Fourth Violation  <input type="checkbox"/> Tier Five Violation  <input type="checkbox"/> Tier Six Violation  <input type="checkbox"/> Tier Seven Violation  <input type="checkbox"/> Other _____</p> <p><b>LEVEL OF OFFENSE:</b> _____</p>	<p align="center"><b><u>NON-AGGRESSIVE BEHAVIOR</u></b></p> <p><input type="checkbox"/> Cheating / Plagiarism Violation  <input type="checkbox"/> Dress Code Violation  <input type="checkbox"/> Misidentification Violation  <input type="checkbox"/> Out of Bounds / Off Campus Violation  <input type="checkbox"/> Possession of Electronic Equipment Violation  <input type="checkbox"/> School Violation  <input type="checkbox"/> Other _____</p> <p><b>LEVEL OF OFFENSE:</b> _____</p>
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**SPECIFIC DESCRIPTION OF OFFENSE:** \_\_\_\_\_  
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 \_\_\_\_\_  
 \_\_\_\_\_

<p align="center"><b><u>STAFF MEMBER ACTION</u></b></p> <p><input type="checkbox"/> 15 second intervention (date)  <input type="checkbox"/> Conference with student (date)  <input type="checkbox"/> Parent contacted by phone (date)  <input type="checkbox"/> Parent contacted by email (date)  <input type="checkbox"/> Conference with parent (date)  <input type="checkbox"/> School office called (date)</p> <hr/> <p align="center"><b><u>ADMINISTRATIVE ACTION</u></b></p> <p><input type="checkbox"/> 15 second intervention (date)  <input type="checkbox"/> Conference with student &amp; returned to class (date)  <input type="checkbox"/> Conference with student &amp; <b>NOT</b> returned to class (date)  <input type="checkbox"/> Parent contacted by phone (date)  <input type="checkbox"/> Parent contacted by email (date)  <input type="checkbox"/> Conference with parent (date)</p> <p><b>Administrative Comments:</b>    _____    _____    _____</p>	<p align="center"><b><u>STUDENT CONSEQUENCE ISSUED BY ADMINISTRATION</u></b></p> <p><input type="checkbox"/> Verbal Warning Issued (date)  <input type="checkbox"/> Silent Supervised Lunch Issued (date)  <input type="checkbox"/> Silent Lunch and Recess (date)  <input type="checkbox"/> In-School Suspension (date)  <input type="checkbox"/> Out-of-School Suspension (date)  <input type="checkbox"/> Loss of Electronic Equipment Privilege (date)  <input type="checkbox"/> Other _____ (date)</p> <hr/> <p><b>Student Signature:</b>    _____</p> <p><b>Date:</b> _____</p> <p><b>Administrative Signature:</b>    _____</p> <p><b>Date:</b> _____</p>
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***Parent or Guardian Signature and Date Required for Aggressive Behavior Offenses ONLY.***  
*This form has been completed due to your student violating school policy, and noted is the corrective action taken and any recommended future actions. Once reviewed, please sign at the bottom of the form and have your student return the form to the PK-6 school office by: (date) \_\_\_\_\_.*

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_