

Disciplinary Referral
Bowie Unified School District #14

Notice to parents/guardians:

1. The purpose of this report is to inform you of a disciplinary incident involving your child.
2. You are urged to appreciate the action taken by the teacher and to cooperate with the corrective action initiated today.

Student Name: _____ **Grade:** _____

Date of Incident: _____ **Teacher:** _____ **Class/Period:** _____

Grade to Date: _____ **Absences to Date:** _____ **Tardies to Date:** _____

Reason For Referral: _____

Teacher Recommendation(s) For This Referral: _____

Teacher Action	Date(s) #1	Date(s) #2	Date(s) #3
Student & Teacher Conference			
Detention with the Teacher			
Parent Notified (phone/letter)			
(other)			

Administrative Action Taken: _____

Detention/Suspension Assigned: _____

Administrator Signature: _____ **Date:** _____