

Teacher Intervention Documentation

For Behavioral Concerns

Student: _____

Grade: _____

Teacher: _____

Room: _____

Period: _____

Possible intervention strategies prior to writing first violation

Classroom observation verbal reprimand of student Date(s): _____

Description: _____

Result: _____

Teacher conference with student Date(s): _____

Description: _____

Result: _____

Change Seat Date(s): _____

Description: _____

Result: _____

Other Interventions Date(s): _____

Description: _____

Result: _____

1st Violation Teacher Assigned Consequence Date: _____

Behavior: _____

Consequences: _____

Result: _____

2nd Violation Parental Contact(s) Date: _____

Name of parent contacted: _____ Means of contact: _____

Behavior: _____

Result: _____

(Submit ROF/TID forms following 2nd violation)

3rd Violation IAT Intervention / Extended Day Date: _____

Behavior: _____

Meeting with student, teacher, and parent

Provide behavior contract

Suggest classroom strategies

Investigate for 504 / SS

Other: _____

4th Violation Dean of Students Date: _____

Removed from class

Other: _____