

# DOCUMENTATION OF STUDENT CLASSROOM BEHAVIOR

Staff Member: \_\_\_\_\_ Term FA/SP/SU: \_\_\_\_ Year: 20\_\_ Course: \_\_\_\_\_ Section: \_\_\_\_\_

Area of Campus: \_\_\_\_\_ Student Name: \_\_\_\_\_ ID#: S000 \_\_\_\_\_

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Please list all observations of student's actions that are distracting, disruptive, mildly threatening\* or inappropriate. This form is for documenting observable behavior, not conjecture of student's mental state at time of actions. Faculty/Staff member and student will meet outside of classroom time to discuss classroom decorum, behaviors that will not be tolerated, and to review and sign this form. Student receives a copy of signed documentation.

**Please list date for each observed behavior being documented. Observed behaviors include the following:**

*Date:* \_\_\_\_\_

*Incident:*

*Date:* \_\_\_\_\_

*Incident:*

*Date:* \_\_\_\_\_

*Incident:*

**\*This form is not a substitution for calling Public Safety. If you feel that a student is behaving in a manner that is putting themselves or others in danger, please contact Public Safety immediately at ext.????.**

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*Meeting Date:* \_\_\_\_\_

Print name \_\_\_\_\_  
Faculty/Staff member

\_\_\_\_\_  
Student

Signature \_\_\_\_\_  
Faculty/Staff member

\_\_\_\_\_  
Student

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Resolved     Forward to Director of Student Life     Forward to VPSL

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