

Level 1 Offense	On Bus Action	1st Write-up	2nd Write-up	3rd Write-up	4th Write-up	5th Write-up
<input type="checkbox"/> Littering <input type="checkbox"/> Throwing paper/non-threatening items <input type="checkbox"/> Not seated properly <input type="checkbox"/> Body part outside the bus window <input type="checkbox"/> Foul language (minor) <input type="checkbox"/> Standing while bus is in motion <input type="checkbox"/> Inappropriate loud noises <input type="checkbox"/> Refusing to obey the bus driver <input type="checkbox"/> Tampering with emergency exits <input type="checkbox"/> Unsafe behavior while outside of the bus (i.e., crossing behind the bus)	Verbal warnings, change assigned seats.	Phone call home.	Written notice sent home.	3-day suspension of bus privileges.	10-day suspension of bus privileges.	Suspension of bus privileges for the remainder of the year.
Level 2 Offense		1st Write-up	2nd Write-up	3rd Write-up	4th Write-up	5th Write-up
<input type="checkbox"/> Inappropriate gestures <input type="checkbox"/> Foul language (major) <input type="checkbox"/> Writing on seats <input type="checkbox"/> Minor harassment/bullying of others <input type="checkbox"/> Rudeness/Disrespect <input type="checkbox"/> Inappropriate display of affection <input type="checkbox"/> Physical aggression without the intention of harm (i.e., horseplay) <input type="checkbox"/> Inappropriate use of bodily fluids (i.e., spitting on floor)		Phone call home.	Written notice sent home.	3-day suspension of bus privileges.	10-day suspension of bus privileges.	Suspension of bus privileges for the remainder of the year.
Level 3 Offense				1st Write-up	2nd Write-up	3rd Write-up
<input type="checkbox"/> Cutting seats <input type="checkbox"/> Other vandalism to the bus <input type="checkbox"/> Possession of matches/lighter <input type="checkbox"/> Taking another person's possessions <input type="checkbox"/> Aggressive verbal abuse of the bus driver or students <input type="checkbox"/> Physical aggression with intent to harm <input type="checkbox"/> Recording others with PCD <input type="checkbox"/> Inappropriate use of bodily fluids (i.e., spitting on someone)				3-day suspension of bus privileges.	10-day suspension of bus privileges.	Suspension of bus privileges for the remainder of the year.
Level 4 Offense					1st Write-up	2nd Write-up
<input type="checkbox"/> Bullying/harassment with the intention to physically or mentally harm <input type="checkbox"/> Sexual harassment <input type="checkbox"/> Possession or use of tobacco or alcohol <input type="checkbox"/> Hazing <input type="checkbox"/> Throwing an object into the driver's area					10-day suspension of bus privileges.	Suspension of bus privileges for the remainder of the year.
Level 5 Offense						1st Write-up
<input type="checkbox"/> Striking the bus driver (i.e. throws object, hits with fist, etc.) <input type="checkbox"/> Possession of weapons or other dangerous objects <input type="checkbox"/> Offense in which law enforcement officials are contacted <input type="checkbox"/> Possession of drugs and/or paraphernalia						Suspension of bus privileges for the remainder of the year.

PAPE SCHOOL BUS, INC.

SCHOOL BUS MISCONDUCT REPORT

STUDENT:	GRADE:	BUS:	INCIDENT DATE:
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OFFENSE LEVEL: 1 2 3 4 5

VERBAL DATE: WRITE-UP: 1ST 2ND 3RD 4TH 5TH

CHECK MARK(S) IN TOP SECTION INDICATE WHICH OFFENSE(S) OCCURRED

NUMBER OF TIMES A MISCONDUCT REPORT HAS BEEN WRITTEN FOR THE SAME OFFENSE

ADMINISTRATIVE USE ONLY BELOW

<input type="checkbox"/> Conference with parent	Parent notified: <input type="checkbox"/> in person <input type="checkbox"/> by phone <input type="checkbox"/> by mail/email Date: _____
<input type="checkbox"/> 3-day suspension of riding privileges	Effective: _____ Your child may resume riding on: _____
<input type="checkbox"/> 10-day suspension of riding privileges	Effective: _____ Your child may resume riding on: _____
<input type="checkbox"/> Suspension of bus riding privileges for the remainder of the school year	Effective: _____

School Principal Notified: in person by phone by email Date: _____

TRANSPORTATION ADMINISTRATOR'S COMMENTS:

DRIVER SIGNATURE:	DATE:	TRANSPORTATION ADMINISTRATOR SIGNATURE:	DATE:
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