



Discipline Packet

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Teacher-Written Eduware, LLC

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Warning



Date: _____ Student's Name _____

You have broken the following rule(s):

____ Uncooperative Attitude

____ Disruptive Behavior

____ Chewing Gum/Eating in Class

____ Unprepared

____ Tardiness

____ Dress Code

____ Other: _____

If you continue to make this choice to disturb learning in our classroom, you will receive an extra written assignment. Choose wisely.

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Silliness

What Did I Do?

I was being annoying by acting silly.

How Does My Actions Affect the Class?

When I clown around during a serious part of class, it distracts other members of the class. They have to stop learning and listen to the teacher deal with me. Other students are negatively affected by my actions. They want to learn, but it makes it harder to learn when I am clowning around.

How Do My Actions Affect Me?

By my silliness, I show how immaturely I can act. The teacher loses respect for me and has to treat me like a small child. I know I am not a small child, but I will get treated like one when I continue to be silly. The teacher might have to call my parents, and I could be punished.

What Should I Have Done?

I should keep my silly thoughts and actions to myself or tell a friend during lunch or after school.

What Will I Do Next Time?

I will stop annoying the class with my silliness. If I have trouble controlling my silliness, I will tell the teacher so we can resolve the problem.

Date: _____

Dear Parent/Guardian,

Your child, _____, violated one or more of the school rules in class today.

- Uncooperative attitude _____
- Disruptive behavior _____
- Chewing gum/eating in class _____
- Unprepared _____
- Tardiness _____
- Dress code _____
- Other _____

Your child has previously been warned and counseled about his/her behavior. All students have been given a copy of the school rules. In addition, student behavior has been discussed in class. Despite these steps, your child displayed the described inappropriate behavior.

Please sign below and write any comments you have on the back of the sheet. Have your child return this letter to school the following day. Failure to return a signed letter will result in further disciplinary action.

Should you have any questions concerning this or any other matter, please feel free to contact me during school hours at _____.

Student's Signature _____

Parent's Signature _____

Parent's Home Phone _____

Parent's Work Phone _____

Student Behavior Contract

I, _____, hereby declare on this date, _____, that I agree to do the following:

1. _____
2. _____
3. _____

My efforts at meeting these goals will be considered acceptable and complete when:

1. _____
2. _____
3. _____

I understand that the consequences of not meeting these goals will include:

1. _____
2. _____
3. _____

I further understand that the rewards for meeting these goals will include:

1. _____
2. _____
3. _____

Ending Date of Contract

Student's Signature

Parent's Signature

Parent's Signature

Teacher's Signature

Administrator's Signature

Student Behavior Contract

for

_____ **Student's Name**

All concerned parties, whose signatures are present on this document below, are in agreement with and will follow the rules, consequences, and privileges of this Student Behavior Contract as listed herein.

1. (List rule) _____

Consequence: _____

Privilege: _____

2. (List rule) _____

Consequence: _____

Privilege: _____

3. (List rule) _____

Consequence: _____

Privilege: _____

Student's Signature

Teacher's Signature

Parent's Signature

Parent's Signature

Date: _____

To the Parents of: _____

Your child has earned a D or an F this grading period in a core class. As you may know, there is no summer school in this school district. Our school has developed a safety net for students who have earned a D or an F in an academic course. Your child may participate in grade recovery to improve a failing grade in a core class.

Your child will have approximately _____ weeks to complete the grade recovery packet to remediate the grade. He or she must complete the work assigned to the satisfaction of the teacher and will receive a new grade of no higher than a C. The goal is for the student to improve study habits in the course after having remediated.

You are required to sign below to indicate your permission and return this letter to the teacher indicated below. Then, once the packet has been given to the student, responsibility for the successful completion rests with the student. No late packets will be accepted by core teachers. Assignments not returned will earn a failing grade for the student.

By signing this letter, you acknowledge the opportunity offered to your child and the conditions explained. Students will be given their grade recovery packets when this letter is returned signed by a parent or guardian. Grade recovery packets are due on _____. Regardless of the date of receipt of this letter, grade recovery packets are due on that date.

If you have any questions, please call me at _____

or contact me via e-mail at _____.

Parent/Guardian Signature _____ Date _____