

STUDENTS

Student Removal Form

<u>STUDENT REMOVAL FORM</u>	
School Name:	
Student:	_____
Teacher:	_____
Class:	_____
Date:	_____
Description of Behavior:	
Administrative and/or Teacher Interventions Attempted Prior to Removal and Results	
Date of Prior Incident Reports: (Note: Prior incident reports must be attached.)	
Signature of Teacher:	