

Level 2 Bus Referral
Oregon Trail School District Transportation

Student: _____ School: _____

Date of Incident: _____ Route #: _____

AM Route PM Route Field Trip/ Special Event Bus Stop Other _____

Referring Staff/ Driver: _____

The student was not being *Safe, Responsible, or Respectful* by: (Choose one)

Abusive/ Inappropriate Language
Fighting/ Physical Aggression
Defiance/ Disrespect/ Noncompliance
Harassment/ Teasing/ Bullying
Possession of Illegal Substance

Property Damage/ Vandalism
Moving While Bus is in Motion
Unsafe Object on Bus
Possession of a Weapon
Other _____

The student hasn't responded to multiple redirections of a minor issue, resulting in this Level 2 Bus Referral.

Description of Event: _____

Student Signature _____ Date _____

Name of Parent Contacted _____ Date _____

School Official Signature _____ Date _____

Consequence: _____

Email completed form to the transportation office: STASandy@ridestra.com