PRINCE GEORGE’S COUNTY PUBLIC SCHOOLS
14201 SCHOOL LANE
UPPER MARLBORO, MARYLAND 20772

DISPOSITION OF STUDENT-STUDENT INCIDENT REPORT

ADMINISTRATION ONLY

Name of Complainant: .................................................................

Name of Target: ...........................................................................

Name of Respondent: .................................................................

School: __________________________ Date: __________________________

How this came to my attention: ....................................................

Resolution

______ counsel students

_______ suspension

_______ expulsion

_______ discipline referral

_______ written plan of action for behavioral change

_______ other ________________________________

Parent/Guardian Notification

_______ verbal and/or _________ written _________ date _____________

______________________________________________________________

Signature of Administrator

Report prepared by: ______________________ Position: ________________

Appendix F

Administrative Procedure 4170