



**DISRUPTIVE STUDENT BEHAVIOR REPORT (DSB)**



Instructor/Staff Name: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Information: \_\_\_\_\_

Campus Location: \_\_\_\_\_

Student Name: \_\_\_\_\_ Date/Time of Incident: \_\_\_\_\_

Contact Information: \_\_\_\_\_

- Select One:            \_ Dismissal from class  
                               \_ Dismissal from class and subsequent class meeting

Witnesses (Name and Contact Information):  
 \_\_\_\_\_  
 \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Description of Incident: \_\_\_\_\_

Administrator Present? \_            If Yes, please list name(s):

Campus Police Contacted? \_        If Yes, please list name(s):

Action taken by Instructor/Staff:  
 \_\_\_\_\_

Did the student leave voluntarily?

IF THE STUDENT WAS ASKED TO LEAVE THE CLASSROOM AND REFUSED TO LEAVE,  
PLEASE FILL OUT THE BOTTOM PORTION OF THIS FORM.

Action taken by Campus Police? \_\_\_\_\_

If Yes, Please list the violations:

\_\_\_\_\_

The Resolution I would like to see:

\_\_\_\_\_

\_\_\_\_\_  
Instructor/Staff Signature  
(Please forward to your Division Dean)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Division Dean Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Discipline Officer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Vice President of Student Affairs

\_\_\_\_\_  
Date

\_\_\_\_\_  
Vice President of Academic Affairs

\_\_\_\_\_  
Date

\_\_\_\_\_  
President

\_\_\_\_\_  
Date