



School Bus Discipline Report

School: _____ Date of Incident: _____ Time of Incident: _____

Student Name: _____ Grade: _____ Route#: _____

- Physical Altercation Sexual Offense Threatening Behavior Physical Assault
- Theft of Property Tobacco Unauthorized Substance Vandalism
- Vandalism Other Bus Violation (for example a repeat Level 1 offense)

Observed Behavior:

Driver's Signature & Date

Supervisor Signature & Date

Offense #: 1 2 3 4

To the Parent or Guardian:

The incident has been investigated and parent has been notified of the following action to be taken to correct student behavior.

Suspension from riding any school bus operated by Horry County Schools for the following time period:

From: _____ Day, _____ Through _____ Day, _____, 20_____

If you should have any questions or concerns please contact your child's school administration at the following telephone number: _____

Principal / Designee & Date