



Request for Removal of Behavioral Emergency Report/Record from MiSiS for Students with Disabilities (SWD)

This form is to be used when a Behavioral Emergency Report/Record (BER) has been created by mistake for a student with a disability and the principal is requesting to have the record removed from MiSiS.

CHOOL:	լ	OCATION CODE:	LD:
Student Name (Last Name, First Name)		10 Digit/District ID#	
ndicate the specific date the BER record was created.			
State the specific reason why this record needs to be deleted.			
Contact's Printed Name	Contact's Signature	Email Address	Date
Principal's Printed Name	Principal's Signature	Email Address	Date
		at jacqueline.mora@lausd.	net.
Approved	VISION OF SPED/BEHAVIOR SU	PPORT DEPARTMENT USE ONLY Not Approved	
omments:			
Approver's Printed Name	Approver's Signature	Fmail Address	Date