

Petitioner \_\_\_\_\_ Date Report Filed \_\_\_\_\_  
Responder \_\_\_\_\_ Date of Meeting: \_\_\_\_\_

**DUE PROCESS FORM  
RIDGELINE MONTESSORI PUBLIC CHARTER SCHOOL**

**RIDGELINE MONTESSORI CORE VALUES:**

*At Ridgeline Montessori Public Charter School we strive to create a more peaceful world by offering a **cosmic education** where self-directed learning is experiential and authentic.*

*Our goal is educating the **human potential** by guiding individuals in obtaining independence in the physical, academic, social, emotional, and spiritual realms.*

*We create safe **prepared environments** that respect where each individual is along the developmental planes and can reveal his/herself. Our learning communities are protected and guided by respect, integrity, observation, listening, inquiry and reflection.*

*In our school, individuals are encouraged to develop positive self-discipline and a sense of accountability, experiencing liberty within limits, while learning to balance freedom and responsibility. Individuals are given the space and time to become active contributing members of their communities, stewards of the plant and to discover their own cosmic task.*

**Part I- Upon completing this first section, please share this form with the other party involved.**

Petitioner's description of incident and explanation of how behavior conflicts with the Core Values:

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**Part II- Upon receipt, responder reflects and completes this section.**

Responder, please describe, in your own words, how your actions and/or attitudes in this incident are consistent with our Core Values:

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**Part III- The remainder is to be completed during a conversation between the petitioner and responder.**

Responder and/or Petitioner, please describe, in your own words, what can be expected of you in the future:

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Responder and/or Petitioner, if changes in performance require additional training, what kind of support would you like to see from administration (the school)?

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Notes:

Signatures and Dates:

Petitioner \_\_\_\_\_ Date \_\_\_\_\_

Responder \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_