

Notice of Expulsion/Conviction

STUDENT NAME _____ DATE ENROLLMENT REQUESTED: _____

Dear Parent/Guardian, please mark as appropriate:

- My child has been expelled from school.
- My child has been adjudicated guilty or convicted of a crime in another state.

If you marked one (1) or both of the boxes above, please complete the remainder of this form. If you marked neither box, please skip to the bottom of this page and sign and date this form.

In compliance with the Board policy requirements explained below, I swear or affirm that I am the parent/legal guardian of this student who was expelled and/or adjudicated guilty/convicted as noted below.

Board policy requires that parents, guardians, Principal, or other persons or agencies responsible for a child complete the following section for a student who has previously been expelled from a public or private school in this or another state or who has been adjudicated guilty/convicted of crimes. This form must be sent to the receiving school within five (5) working days of the time when the student requests enrollment in the new school.

Check the reason(s) that apply:

- | | |
|---|--|
| <input type="checkbox"/> Homicide | <input type="checkbox"/> Violation of Law Relating to Alcohol |
| <input type="checkbox"/> Assault | <input type="checkbox"/> Violation of Law Relating to Drugs |
| <input type="checkbox"/> Sex offense | <input type="checkbox"/> Violation of School Regulation Relating to Alcohol |
| <input type="checkbox"/> Violation of Law Relating to Weapons | <input type="checkbox"/> Violation of School Regulation Relating to Drugs |
| <input type="checkbox"/> Violation of School Regulation Relating to Weapons | <input type="checkbox"/> Any violent offense that resulted in death or serious physical injury to victim |

My child was expelled from: _____ in _____

Name of School *City*

County *State*

The facts of any expulsion or adjudication/conviction are as follows (attach separate sheet if needed):

I swear or affirm that to the best of my knowledge or belief, the statements and information contained above are true, factual, and complete.

Parent/Guardian's Signature

Date

Witness's Signature

Date