

SUSPENSION REPORT

DALLAS SCHOOL DISTRICT

111 SW Ash Street ✦ Dallas, Oregon

School _____ Date _____ Time _____ AM/PM

Student _____ Special Ed ☐ Yes ☐ No Case Manager _____

Parent/Guardian _____ Phone _____

Address _____ Grade _____

Suspension Offense(s):

- | | | |
|--|--|---|
| <input type="checkbox"/> Aggressive Behavior | <input type="checkbox"/> Fighting | <input type="checkbox"/> Property Offense |
| <input type="checkbox"/> Alcohol Related | <input type="checkbox"/> Fire/Chemical | <input type="checkbox"/> Threat |
| <input type="checkbox"/> Assault | <input type="checkbox"/> Gang Related | <input type="checkbox"/> Tobacco |
| <input type="checkbox"/> Attendance | <input type="checkbox"/> Harassment | <input type="checkbox"/> Weapon |
| <input type="checkbox"/> Computer Misuse | <input type="checkbox"/> Insubordination | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Disruptive Conduct | <input type="checkbox"/> Persistent Failure to | |
| <input type="checkbox"/> Drug Related | Comply | |

Description of Incident:

Suspended _____ Day(s) From _____ through _____ ISS _____ Day(s)

Dear Parent/Guardian:

1. This suspension is issued in compliance with Oregon Revised Statutes 339.250-399.260, along with the Policies and Bylaws of Dallas School District, Policy JGD.
2. The School will make an effort to collect homework for the student if the suspension is for 3 full days or longer. Homework will be available after 3:30 PM on the second day of the suspension.
3. During suspension the student is not to be on any Dallas School District property or attend any school activities without specific authorization from the school administrator to attend tutoring or counseling sessions.
4. The district will provide educational services to a special education student who is suspended or expelled for more than 10 school days in a school year. These services may be provided in a different location or interim alternative educational setting as determined by the IEP and placement teams.
5. A parent/guardian conference is / is not required prior to reinstatement. This conference, if required, has been set for _____ (date/time). Please call _____ to confirm this appointment. Please call and reschedule the conference if you are unable to attend the specified time.

School Administrator Signature

Parent/Guardian Contact: ☐ Phone ☐ School Visit ☐ Home Visit ☐ Message Time _____

☐ Pending Expulsion Hearing

☐ Pending Manifest Determination Hearing