

THE PATHWAYS SCHOOLS  
SUSPENSION NOTICE

(File in Student Record, send to Administrative Office, LSS, Parent/Guardian)

STUDENT'S NAME: \_\_\_\_\_ ~~WOUOK~~ .....

DATE OF INCIDENT: \_\_\_\_\_

REASON FOR SUSPENSION: (check all that apply)

- ☐ Drug/alcohol Possession or Use
- ☐ Drug/alcohol Distribution
- ☐ Tobacco Possession
- ☐ Weapon/Explosives
- ☐ Physical Attack of Staff/Adult
- ☐ Physical Attack of Student
- ☐ Serious Bodily Injury
- ☐ Threat of Staff/Adult
- ☐ Threat of Student
- ☐ Fighting
- ☐ Bullying/Harassment
- ☐ Extortion
- ☐ False Alarm/Bomb Threat

- ☐ Sexual Assault
- ☐ Sexual Harassment
- ☐ Sexual Activity
- ☐ Disrespect/Insubordination
- ☐ Disruptive Behavior
- ☐ Participating in/Provoking Disruption
- ☐ Theft
- ☐ Vandalism/Property Destruction
- ☐ Arson
- ☐ Refusal to Obey School Policies
- ☐ Other (specify)

\_\_\_\_\_

TERMS OF SUSPENSION:

Dates of ISS \_\_\_\_\_

\_\_\_\_\_ Total # of days of current ***in-school suspension (ISS)***

Dates of OSS \_\_\_\_\_

+ \_\_\_\_\_ Total # of days of current ***out-of-school suspension (OSS)***

+ \_\_\_\_\_ Total # of prior suspension days during school year (ISS and OSS)

= \_\_\_\_\_ Total # of days suspended during current school year

Additional comments, if any:

For any additional information, please contact: