CAREER ACADEMY
3801 Crescent Circle
South Bend, IN 46628

CAREER ACADEMY NETWORK OF PUBLIC SCHOOLS

Career Academy South Bend Middle School
NOTICE OF STUDENT SUSPENSION

Date: _____ Time: _____ AM / PM

To: The parent or guardian of:

_____

ID # _____

From: _____ Mrs. Maria Reilly, Principal

_____ Mrs. Roxanne Bryant, Dean of Students

This notice is to inform you that _____ was suspended from Career Academy Middle School for _____ school day(s) beginning on _____ and returning on _____

For a student with a disability that has been removed for 10 days or more, a manifest determination review will be conducted with the case conference committee.

_____ Notice of Procedural Safeguards Provided _____ Paperwork provided to TOR

_____ A parent meeting **IS REQUIRED** for reinstatement.

_____ A parent meeting **IS NOT REQUIRED** for reinstatement.

This suspension includes all extracurricular and school-sponsored activities, including field trips, and sporting events. They may not be on school grounds at any of the Career Academy Network of Public Schools for any reason.

Prior to being suspended from school, this student was provided with an informal meeting on the alleged misconduct, which included:

1. An oral statement of the charges against the student, to which the student was given a chance to respond.
2. A summary of the evidence against the student, where the student listened to the charge(s).

At this meeting it was determined:

1. _____

_____

2. _____

_____

Administrator Signature: _____

Parent notified via: _____ email: _____ phone