

Lakeland Joint School District #272

Superintendent of Schools

P.O. Box 39, Rathdrum, Idaho

83858 208-687-0431

www.sd272..org



LJSD Vision: A community committed to academic excellence ... dedicated to student success.

NOTICE OF TEMPORARY SUSPENSION

TO: _____ CC: _____
(Parents/Guardian) (Superintendent)

RE: _____
(Student Name)

(Grade)

(Address)

(Telephone)

You are hereby notified: Pursuant to the procedures adopted by the Board of Trustees (“Board”), an informal hearing was held pertaining to the temporary suspension of the above-named student enrolled in **the** Lakeland Joint School District.

Reason(s) for temporary suspension: Violation of Policy 3330

Date of informal hearing: _____

Number of days suspended: _____

Date(s) of suspension: _____

Date student and parent(s)/guardian(s) were informed of the decision _____.

A copy of this notice ~~has been~~ **was** provided to the parent:

In person

Electronic Mail

Standard Mail

You have a the right to contact the Superintendent or a formal hearing before the Board if you believe your child has been wrongfully suspended.

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- This student's records have been reviewed, and the **student qualifies** for services under the Individuals with Disabilities Education Act or Section 504 of the Rehabilitation Act.
- This student's records have been reviewed, and the **student does not qualify** for services under the Individuals with Disabilities Education Act or Section 504 of the Rehabilitation Act.

Principal

CC: Student File