AFFIRMATION OF PRIOR DISCIPLINE RECORD

VALLEY LUTHERAN HIGH SCHOOL
3560 McCarty Rd Saginaw, MI 48603
PHONE: 989.790.1676 - FAX: 989.790.1680
EMAIL: admissions@vlhs.com

Directions: ***Parent*** - Please complete the top section. Check paragraph 1 or 2, provide all appropriate information, and sign. Please provide to prior school administration to complete the bottom section.

Administrator – Please complete the bottom section, verifying the information provided. Upon completion, submit to Valley Lutheran High School using the email or fax information above.

A willful false statement on this affirmation will result in report to the appropriate authorities and possible removal from Valley Lutheran High School.

Paragraph 1:

_____ The undersigned affirms that _____(child's name) has **NOT** been suspended or expelled from any public or private school in Michigan or any other state.

Paragraph 2:

_____ The undersigned affirms that _____ (child's name) has been suspended or expelled from any public or private school in Michigan or any other state.

If you checked *Paragraph 2*:
Explain the circumstances in detail. Include the school name, dates of suspension or expulsion, and a description of the incident, giving rise to the suspension or expulsion, on the back of this form.

Date: _____ Signature of Student_____

Date: _____ Signature of Parent_____

(To be completed by previous school administration)

_____
Name of Sending (Former) School District (above)

_____ According to our records, we can verify that the information provided above by the parent/student is correct.

_____ According to our records, the information provided above by the parent/student is NOT correct.

If the student has been involved in offenses involving weapons, alcohol or drugs, or willful infliction of injury to persons or an act of violence against persons and/or property committed on school premises at a school sponsored activity, or on a public or private conveyance providing transportation to or from school or a school sponsored activity, please forward appropriate disciplinary documentation.

Date: _____ _____
Signature of Sending School District Administrator/Title

School _____ Telephone:_____