



Mount Clemens Community School District

NEW STUDENT QUESTIONNAIRE

Affirmation of Prior Discipline Record

Mount Clemens Junior High
161 Cass Avenue Mount Clemens, MI 48043
(586) 469-3300

Directions: Parent — Please check paragraph 1 or 2. Provide all appropriate information then sign.

A willful false statement on this affirmation will result in a report to the appropriate authorities and possible removal from Mount Clemens Middle School.

Paragraph 1:

I the undersigned affirms that _____ has not been suspended or expelled from any public or private school in Michigan or any other state for an offense involving weapons, alcohol or drugs or for the willful inflection of injury to another person or for any act of violence against persons and/or property committed on school premises at any school sponsored activity or on a public or private conveyance providing transportation to and from a school of school sponsored activity.

Paragraph 2:

I the undersigned affirms that _____ has been suspended or expelled from any public or private school in Michigan or any other state for an offense involving weapons, alcohol or drugs or for the willful inflection of injury to another person or for any act of violence against persons and/or property committed on school premises at any school sponsored activity or on a public or private conveyance providing transportation to and from a school of school sponsored activity.

If you checked paragraph 2 explain the circumstances in detail. Include the school name, dates of suspension (s) or expulsion, and a description of the incident.

Parent's Signature _____ Date _____



Name of former school district _____

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

_____ According to our records, we can not verify that the information provided above by the parent/student is correct.

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

Date

Signature of Sending School District Administrator/Title

Telephone

School

Return via FAX to: Mount Clemens Junior High (586) 469-7021 Attention: Student Records