

STUDENT SUSPENSION/EXPULSION WAIVER FORM

I hereby waive my right to a hearing in the matter of potential suspension or expulsion from school for the alleged misconduct of _____.

Said hearing was set for the _____ day of (month) _____, 2____.

Dated this _____ day of _____, 2____.

Student

Parent, guardian or other
responsible person.

WEST CENTRAL SCHOOL DISTRICT