

RSU #16 (Mechanic Falls, Minot, Poland)

Policy Code: JKE-E1

Adopted: January 2010

Revised:

Re-Admission Information for Hearing by the School Board

Student Name: _____

Date of Expulsion: _____

Reason for Expulsion: _____

Name of Re-entry Coordinator: _____

Name of Case Manager/Mentor (SAT): _____

1. Evidence of the completion of a Personal Growth Program:

A. Educational program (attach letter from tutor)

B. Community service (attach letters of community service)

C. Counseling (include a recommendation from Counselor)

2. ____ Substance Abuse Counselor (if applicable) Report Attached.

3. ____ Re-entry Report attached. Re-admission recommended by the Re-entry Coordinator.

Yes ____ No ____

4. Is there evidence that the behavior leading to expulsion is not likely to recur?

5. ____ Behavioral Contract attached.

6. Principal's Recommendation: Re-admit ____ Do not Re-admit ____

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