

Lebanon Community Schools

Code: **IGBHC-AR/JGE-AR(D)**
Revised/Reviewed: 6/15/98; 12/16/10
Orig. Code(s): IGBHC-AR/JGE-AR(D)

Alternative Education Program Notification/Selection Form

To: _____ Date: _____
Parent/Guardian

Address

City/State/Zip School: _____

In accordance with Lebanon Community School District policy, we are notifying you of alternative education programs available to your student. The basis for this notice is the following condition(s):

- 1. The student has demonstrated severe disciplinary problems.
- 2. The student has an erratic attendance record.
- 3. The student will be going through expulsion procedures or has been expelled.
- 4. The parent has applied for student exemption from compulsory attendance as defined in ORS 339.030.

The district offers the following options for alternative education. Please mark your choice.

1. _____ Contact: _____
2. _____ Contact: _____

The district recommends _____
on the basis of the student's learning styles and needs.

Building administrator: _____

*I have received this notification: _____ Date: _____
*(To be signed unless sent by certified mail) Parent/Guardian

If you have questions about the above options or the school's recommendations, please contact the building administrator.

I understand that I am responsible for returning this signed/dated form to the superintendent's office in the enclosed self-addressed envelope. I understand that failure to return the form does not release me from my obligations under the Compulsory Attendance Law (ORS 339.020). Furthermore, I understand that I am

responsible for making the contact and enrolling the student in the selected program. I give my permission for student information to be shared between resident school and the alternative provider I have selected above.

Parent/Guardian signature

Date

Student signature (If age 18 or older)

Date