

# AFFIRMATION OF PRIOR DISCIPLINE RECORD

## BETHLEHEM LUTHERAN SCHOOL

2777 Hermansau St. Saginaw, MI 48603

Phone: 989-755-1144

Email mmiller@bethlehemSaginaw.org

**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. Upon completion, return to Bethlehem Lutheran.

**Administrator** - Please complete the bottom section, verifying the information provided. Upon completion, return to the requesting family.

**A willful false statement on this affirmation will result in report to the appropriate authorities and possible removal from Bethlehem Lutheran 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 back of this form.

Date: \_\_\_\_\_

Signature of Student \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Parent \_\_\_\_\_

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(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: \_\_\_\_\_