

West Central School District 49-7



STUDENT SUSPENSION/EXPULSION

Waiver

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 (month) _____, 2____.

Student

Parent, guardian or other responsible person

