***Trinity Lutheran School in Clinton Township***

38900 Harper Avenue • Clinton Twp, MI 48036 • 586-468-8511 • FAX 586-468-1226

 • www.trinityct.org •



NEW STUDENT QUESTIONNAIRE

**Affirmation of Prior Discipline Record**

Parent: Please check paragraph 1 or 2, provide all appropriate information then sign.

**A willful false statement on this affirmation will result in report to the appropriate authorities and possible removal from Trinity Lutheran School.**

***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.

***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 the back of this form.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Parent\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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*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 suspended or expelled at any time, please provide documentation of each event.

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:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_