

DENVER PUBLIC SCHOOLS

PARENT NOTIFICATION LETTER

OUT-OF-SCHOOL SUSPENSION UP TO FIVE DAYS

Today's Date	
Student's First Name Student's Middle Name Student's Last Name Parent's Name Address City State	Student ID Date of Birth Grade
Zip	Parent's Phone
Date of Incident	
Reason for Suspension(Offense title found on matrix)	
Start Date of Current Suspension	Days of Suspension
End Date of Current Suspension (Pay close attention to weekends and school holidays)	
conference has been scheduled for at for appointment, please call Please request homework for your student by at During this suspension Public Schools property without permission of the suspension, students shall be allowed to earn experienced coursework. The school will provide the state of the school will provide the school will be school	on, the student is not to be on any Denver the principal or designee in charge. During this quivalent grades and credits if they complete the
This suspension will be counted towards declar	ation of the student as habitually disruptive.
Yes	
No	

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DISCIPLINE INCIDENT REPORT- Page 1

School:	Perso	on Reporting:	
Date of Incident: Time of Incident:			
Description of Incident: (who, what, where, when & why). Use Student A, Student B, Teacher A for all names except the name of the student for whom this request is being submitted			
Action Taken:			
Follow Up Action Planned?	Yes	No	
Notifications (check all that ap	ply)		
Police:		Date:	
		Time:	
Doctor/Nurse:		Date:	
		Time:	
Parent/s:		Date: Time:	
011.			
911:		Date: Time:	

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Discipline Incident Report- Page 2

School I	Name:
Date of	Incident:

Name of students and/or persons involved in incident. (For this section you **WILL** provide the names for each person involved.)

Example:

Student A: Last Name, First Name Student B: Last Name, First Name Teacher A: Last Name, First Name

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