

**North Santiam  
School District**

Code: **IGBHC-AR**  
Adopted: 8/22/02  
Orig. Code(s): IGBHC-AR

**Alternative Education Notification**

DATE: \_\_\_\_\_

TO THE PARENT OF: \_\_\_\_\_

FROM: \_\_\_\_\_

RE: NOTIFICATION OF ALTERNATIVE EDUCATION

\_\_\_\_\_

Your student qualifies for alternative education as a result of the following student action: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Alternative education programs available for your student at this time consist of: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The recommendation of district staff members for your student is: \_\_\_\_\_

\_\_\_\_\_

Procedures for enrolling your student in the recommended program are as follows: \_\_\_\_\_

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