

**Helix School District 1R**

Code: **JHFDA-AR(1)**  
Adopted: 7/2/97  
Orig. Code(s): None

**Request for a Suspended Driving Privilege - Conduct**

Students Name \_\_\_\_\_

Address of Student \_\_\_\_\_

Date of Birth \_\_\_\_\_ ODL License # (if applicable) \_\_\_\_\_

Number of requests for suspension on this one: \_\_\_\_\_ two or more \_\_\_\_\_

Type of privilege requested for suspension:

- \_\_\_\_\_ Driving privilege
- \_\_\_\_\_ Application for driving privilege

Length of suspension requested:

- \_\_\_\_\_ No more than one year
- \_\_\_\_\_ Six months
- \_\_\_\_\_ Six weeks
- \_\_\_\_\_ Other

If two or more request for suspension have been made on this student:

- \_\_\_\_\_ (Two Years)
- \_\_\_\_\_ ( )
- \_\_\_\_\_ Until student is 21 years of age

Type of infraction:

- \_\_\_\_\_ Expelled for bringing a weapon to school
- \_\_\_\_\_ Suspended or expelled at least twice for assaulting or menacing a school employee or another student, for willful damage or injury to district property or for use of threats, intimidation, harassment or coercion against a District employee or another student.

This written request is submitted by \_\_\_\_\_  
Name Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date