

Long Creek School District 17

Code: **IGBHC-AR**
Revised/Reviewed: 6/09/03; 4/17/12
Orig. Code(s): IGBHC-AR

Alternative Education Notification

Date _____

To: Parent of _____

From: _____

Re: Notification of Alternative Education

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

Alternatives 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: _____

