

Stanfield School District 61

Code: **IGBHC-AR**
Adopted: 10/9/02
Readopted: 4/10/08
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: _____

