

FORM F358-1 SECTION: STUDENTS	
Adopted/Original Date of Issue	2004
<input checked="" type="checkbox"/> Last Reviewed <input checked="" type="checkbox"/> Revised	2024
Next Review Date	2028
Contact	Superintendent of Safe Schools

Notification of Suspension

NOTIFICATION OF SUSPENSION (FOR GRADES 4 TO 12) [on school letterhead]

[Date of issue]

[Parent/Guardian or Adult Student]
[Address]

Dear [Parent/Guardian or Adult Student Name]:

Re: Suspension of [Student's Name], [Date of Birth] from [Name of School]

Please be advised that [student's name/you] [has/have] been suspended from attending [name of school] and from engaging in all school-related activities from [effective date of suspension] to [last day of suspension] inclusive, i.e. [state the number] school days. This suspension applies to all school buildings, grounds, school buses, school functions, activities and trips. [Student's name/You] may return to school on [date] at [time]. [Student's name/You] must report to the school office before returning to classes.

This suspension is made in accordance with the *Education Act*, Administrative Procedure 140 Code of Conduct, Administrative Procedure 358 Student Discipline: Suspension and [name of school's] Code of Conduct.

The reason for this suspension is [use the infraction applicable]. Namely, my findings indicate that [student's name/you] [describe incident with particulars].

School work is available at the school office. Please call the school to make arrangements to have it picked up.

[If suspension is 6 school days or longer] In addition, [student's name/you] [has/have] been assigned to an Alternative Suspension Program, a program for suspended students. This Alternative Suspension Program will provide an opportunity for continued academic work and support for self-management to assist with the re-entry to school.

Please confirm [the student's/your] participation in an Alternative Suspension Program at your earliest opportunity by contacting the school. As soon as notice of [the student's/your] participation is received, a planning meeting will be scheduled.

Should you wish to discuss this matter, I shall be pleased to arrange a time for us to meet.

Should you wish to appeal this suspension, you must provide written notice of your intention to appeal to the superintendent responsible, [contact information], within ten (10) school days of the commencement of the suspension, i.e., before [insert date]. You may then contact the superintendent responsible to discuss the appeal. Please be aware that an appeal does not stay the suspension.

Sincerely,

[signed by Principal]

cc
Superintendent of Education
Ontario Student Record (OSR)

Form History

Approved:	2004; January 2008; February 2024
Reviewed:	January 2008; 2023
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