



**Substance Abuse Policy Violation Contract /
Suspension Form
JICH-E1**

School: _____ Date of Violation: _____
Length of Suspension: from _____ to _____

Student Name _____ Student # _____ Grade _____

Date of Birth _____ Sex F M Home/Cell Phone # _____

Mailing Address _____
Street or PO Box _____ City _____ State _____ Zip Code _____

Ethnicity (please circle one) Anglo Hispanic African American Asian/Pacific American Indian/Alaskan

Name of Parent/Guardian: _____

REASON FOR INFRACTION: THIS SECTION MUST BE FILLED OUT

<input type="checkbox"/> <u>MARIJUANA</u> Possession or Under the Influence	<input type="checkbox"/> <u>ALCOHOL</u> Possession or Under the Influence	<input type="checkbox"/> <u>TOBACCO</u> Possession	<input type="checkbox"/> <u>OTHER</u> _____
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PURPOSE OF CONTRACT: This contract formally documents your daughter's/son's violation of *LCPS Policy JICH Alcohol, Tobacco, and Other Drugs Policy* - In all cases, violation of this policy may result in a suspension. In addition, with some violations, the administrator may also include other acceptable interventions in addition to the suspension. For first and second offenses or minor violations, student needs shall be identified and addressed at the school. The administrator will assist you with understanding the expectations for the duration of the contract.

STUDENT EXPECTATIONS:

I understand that during my suspension, I am ineligible to hold student office or participate in interscholastic, co-curricular, or any other extracurricular activities. Furthermore, I agree to the following conditions for remaining within the District:

- First Violation:** The student and parent/guardian must sign the Substance Abuse Contract/Suspension Form; have a parent meeting, a possible 3 to 5 day suspension, and a possible Class III Citation #: _____. **If a Class III is issued, student and parents will be contacted by JPO to determine intervention. Student must attend a mandatory District Insight Drug Intervention Class or may be subject to a long term suspension.**
- Second /and Subsequent Violations:** Student shall be suspended for up to ten days with administration pursuing a long-term suspension for one-year. Parent will be contacted; possible Class III Citation #: _____. **If a Class III is issued, student and parents will be contacted by JPO.**

SIGNATURES REQUIRED AT THE TIME OF EACH VIOLATION

_____	_____	_____	_____
Student Signature	Date	Parent/Guardian Signature	Date
_____	_____	_____	_____
School Official Signature	Date	Witness Signature	Date

School Athletic Department use only (if applicable):

Suspension from participation dates: _____ Suspension from competition date(s): _____
School Conference Date: _____