

21697 State Hwy 56
Austin, MN 55912
Phone (507) 857-1160
Fax (507) 355-1218
Dan Armagost, Executive Director
Denise Kennedy, Director of Special Education

NOTICE OF SUSPENSION

(Date)
(Name of Parent or Guardian) (Address) (City, State, Zip)
Dear (Parent or Guardian)
(<u>Name of Student</u>) has been suspended from (<u>name of school</u>) for (<u>number of days</u>) commencing on (<u>date</u>).
The grounds for suspension are:
The testimony received was:
An administrative conference to determine the above was conducted before by:
, at on
(Name of Administrator) (Time) (Date) pursuant to Minn. Stat. §§ 121A.40-121A.56, a copy of which is enclosed.
The plan of readmission is:
While suspended, the student may not come on any school campus except with you for the purpose of discussing conduct.
If you have any questions, please call 507-857-1160.
Sincerely,
Dan Armagost, Executive Director

Enc: Minn. Stat. §§ 121A.40-121A.56

Notice approved by the SMEC Governing Board on: 07/21/2022