

**MONROVIA UNIFIED SCHOOL DISTRICT
Pupil Personnel Services**

APPLICATION FOR HEARING ON READMISSION – EXPELLED PUPILS

Pupil's Name: _____ Grade: _____

Address: _____ Date of Birth: _____

_____ Phone (home): _____

Parent/Guardian: _____ Phone (work): _____

I, _____, hereby apply for readmission to a school within the Monrovia Unified School District. My personal statement requesting the privilege of returning to Monrovia Unified School District is attached. (Minimum of 5 paragraphs)

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- It is understood that I may begin the readmission process on _____ (one month prior to the beginning of the semester/term).
 - It is understood that reapplication for readmission must occur during the established review date period only.
 - I understand that in order to be considered for readmission, I must verify that the conditions of my rehabilitation plan have been successfully accomplished.

Place an X in the boxes below to indicate the documentation being submitted along with this application.

- 1. Transcript from the school attended during the time of expulsion;
- 2. Copy of the attendance report from the school attended;
- 3. Letter from a school official indicating the pupil's behavior/discipline records in the school attended, the number of referrals to the office and number of suspensions and reasons for suspensions;
- 4. Letter from the pupil's probation officer indicating the conduct of the pupil during expulsion, if applicable (or a letter from the student).
- 5. Letter from a community agency indicating the completion of counseling sessions, if applicable;
- 6. Community service, if applicable and/or fulfillment of all court-ordered requirements.
- 7. Verification of completion of recommended rehabilitation programs, if applicable.
- 8. Verification of completion of recommended counseling, if applicable.

Pupil Signature

Date

Parent Signature

Date

References: Education Code Section 48916
Board Policy 5115