

**Admission and Withdrawal**

**Affidavit Regarding Prior Discipline**

**OATH OR AFFIRMATION REGARDING PRIOR DISCIPLINE  
TO BE COMPLETED PRIOR TO ENROLLMENT OF STUDENT**

I, \_\_\_\_\_ having been duly sworn upon my oath,  
Parent/Guardian

or having affirmed that I will tell the truth, do hereby state and depose as follows:

I am the parent/guardian, or other person having custody or charge of

\_\_\_\_\_, a student seeking to enroll in  
Student

\_\_\_\_\_, and am legally authorized to make  
School District

educational decisions for the Student.

I hereby certify as follows: (Check one, and provide all additional information requested.  
WARNING: Under Missouri law, the failure to provide true, accurate, and complete information to each and every question and subpart thereto may result in your being charged with and convicted of a Class B misdemeanor.)

\_\_\_\_\_The Student **has never been suspended or expelled** from any school in this state or any other state for any offense relating to weapons, alcohol or drugs, or for the willful infliction of injury to another student.

\_\_\_\_\_The Student **has been suspended and/or expelled** from school in this state or another state for one or more offenses relating to weapons, alcohol or drugs, or for the willful infliction of injury to another student.

**For each and every suspension and/or expulsion**, provide the following information (request additional information sheets, if necessary):

1. Name and Address of School District.
2. Name of School.
3. Nature of Offense.
4. Date of Offense.
5. Date Suspension/Expulsion Began.
6. Date Suspension/Expulsion Ended/Is Scheduled to End.

I hereby certify that I have provided true, complete, and accurate information for each and every suspension and/or expulsion imposed upon the Student for each and every offense relating to weapons, alcohol or drugs, or for the willful infliction of injury to another student.

I hereby swear or affirm that all information I have provided in this document is true, accurate, and complete to the best of my knowledge.

I understand that if I have provided any false information in this document that I may be charged with and convicted of a Class B misdemeanor.

I also understand that this registration document will be maintained as part of the Student's permanent scholastic record.

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Signature of Parent/Guardian

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Date

