Copper Country Intermediate School District 809 Hecla Street Hancock, Michigan 49930-1212

JUVENILE CRIME & TRUANCY PREVENTION PROGRAM Office: (906) 482 4250 ext. 137 FAX: (906) 482-1931

MEETING NOTIFICATION

Name:			
Address:			
Telephone:			
On	, Superinten	dent/Principal	of
	School contac	ted the EEISD Attend	lance-Officer to
report attempts to m	ediate your child's:	· · · · · · · · · · · · · · · · · · ·	with you
have been unsuccess	ful. In accordance with	the Michigan School	Code, s 380.1586 you ar
requested to attend a	meeting at:		Date:
Time:	with the following scl	hool-officials:	·
	olution in this matter is		ttendance complaint file SD Attendance Officer
_	t as evidence of your ch		be presented in Probate compliance with the
Issued by:		Date:	
ÇÇIŞD A	Attendance Officer		•
Original - CCISD-At	tendance-Officer		
Copy 1 - Parent (or)	Guardian `		
Copy 2 - CCISD Sup	erintendent		

Copy-3 - Reporting School Superintendent/Principal