

CELL PHONE INFORMATION

STUDENT: _____

GRADE: _____

TEACHER: _____

DATE AND TIME TAKEN: _____

Please detach the form, wrap it around the cell phone (secure it with a rubber band), and place it in the appropriate administrator's box.

CELL PHONES TAKEN FOR THE FIRST TIME MAY NOT BE PICKED UP UNTIL A CONFERENCE IS HELD WITH AN ADMINISTRATOR!

PARENT SIGNATURE: _____

2nd Offense: 30 days

3rd Offense: 60 days

4th Offense and Thereafter: Remainder of School Term

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