## STUDENT DISCIPLINARY CODE AND PROCEDURE ACCEPTANCE CORNERSTONE COLLEGE, 2024

Student's Name:



| Grade:   |  |        |
|--|--|--------|
| Admin No:  |  |        |
| Register Teacher:  |  |        |
|  |  |        |
|  |  | Yes/No |
| Have you received the 2024 School Procedures Brochure?                     |  |        |
| 2. Has it been explained to you?   |  |        |
| 3. Have you understood?  |  |        |
| 4. Do you accept the 2024 School Procedures and will you comply with them? |  |        |
|  |  |        |
| If your answer is yes, please sign below.                                  |  |        |
| Student Signature:   |  |        |
| Date:  |  |        |

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