Poolesville High School
17501 Willard Road
Poolesville, Maryland 20837-2006

Zero Tolerance Policy

The purpose of the Zero Tolerance Policy is to have students think before they act and to be responsible for their actions if they become involved with alcohol, drugs, controlled substances and/or weapons or facsimiles thereof ON SCHOOL GROUNDS OR AT SCHOOL-SPONSORED/SANCTIONED ACTIVITIES AWAY FROM THE SCHOOL. These activities are a violation of Maryland State and County Laws. Students who bring, are in possession of, or in any way involved with alcohol, drugs, controlled substances, weapons, or facsimiles thereof on to school grounds or to school-sponsored/sanctioned activities, or who under the influence of such substances, may be suspended for ten days with a recommendation for expulsion. If the student is not expelled and returns to Poolesville High School, the student may be denied the privilege of participating as an active member and/or as a spectator in any extracurricular activity sponsored by the school for a period of 30 scheduled school days from the recorded date of the incident. Any subsequent incident will result in Zero Tolerance being applied for a period of up to one school year.

Students violation the PHS Zero Tolerance Policy may, within ten school days of the offense, submit a written plan for rehabilitation (drug rehab, AA, etc.) to the school administration. If the plan is accepted and successfully implemented, the principal may reduce the non-participation phase. This provision is designed to make the Zero Tolerance Policy a tool that is not only aimed at enforcement, but at encouraging reform and improvement.

This Zero Tolerance Policy was originally implemented on August 14, 1999, and updated in the fall of 2005, and will remain in effect until further notice. A committee of concerned parents, PTSA members, students, community members, and staff developed this policy.

I am aware that Poolesville High School enforces a Zero Tolerance Policy and that it has been reviewed with me. My signature indicates that I have been informed of this policy and that I understand its content.

_________________________________________________    _________________
Printed Name                                      Grade

______________________________________________     __________________
Student Signature                                 Date