



SOUTHERN LAB[®]

SOUTHERN UNIVERSITY
LABORATORY SCHOOL

Student Behavioral Statement

Student Name _____ Grade _____

Current School _____ Phone # _____

Please provide a brief statement on the student listed above in the categories listed below. This form is may be emailed or faxed to the school: **Email:** ashley_square@sulabschool.com **Fax Number:** 225-771-2782

Attendance	
Behavior	
Work Habits	
Suspension(s)	
Expulsion	
Other Comments	

Signature of Principal, Guidance Counselor or Designee

Print Name

Date