

MISSION CONSOLIDATED INDEPENDENT SCHOOL DISTRICT

Questioning of Student Form (Form B)

1. My name is	Badge #	Badge #	
2. I am (check the box that applies) ☐ A Texas law enforcement officer with (name	of agency)		
☐ Hidalgo County Sheriff Department			
An Hidalgo County juvenile probation office	er		
An investigator of the Texas Department of I official investigation of a report of suspected		nducting an	
I need to question this student at school for the	he following REASON:		
PERMISSION FOR MCISD TO CONTACT PAREN			
	`	If yes, see below)	
Campus			
Student	I.D. #		
Grade	D.O.B		
Parent/Guardian			
Address			
Home Phone			
(Signature of representative/officer or copy of II		Time	
FOR MISSION C	CISD USE ONLY:	~~~~~~~	
IF PERMISSION GRANTED (SEE ABOVE): Informed Parent/Guardian			
Name	Date	Time	
Reported to Superintendent's (Designee) Office	Du	T.'	
Name	Date	Time	
Campus Administrator's (Designee) SignatureName	Date	Time	
Name	Date	1 iiile	

THIS IS A GOVERNMENT RECORD. A PERSON COMMITS AN OFFENSE IF HE/SHE KNOWINGLY MAKES A FALSE ENTRY IN A GOVERNMENT RECORD. Section 37.10, Texas Penal Code.