**WST 2 - NOTICE OF SUSPENSION**

(This document is confidential and shall only be distributed to the parties to the hearing and shall be held on file at Regional and National Offices. A copy of this Notice may be issued to the Member’s SGL or DC or RC at their request.)

MEMBERS NAME:

SD MEMBERSHIP NO:

WARRANT NUMBER:

POSITION:

GROUP NAME:

DISTRICT:

REGION:

DATE OF SUSPENSION:

This serves to inform you that:

|  |  |  |
| --- | --- | --- |
| Your Warrant number SSA …….......has been suspended  | From | To |
| Your Licence number ……...has been suspended | From | To |
| You have been suspended as a Member of the Movement | From | To |

You are required to return your suspended Warrant and or Licence certificates into the care of your Next-in-line Scouter to hold during this suspension.

Delete 1 or 2, whichever is not applicable:

1. During the period of suspension of your Warrant or Licence, listed above you may not be responsible for any activity for which the suspended warrant or Licence would normally allow you to be responsible.

You may participate in any Scouting activities as an Adult Member. You must attend any required training that was agreed to be completed during this suspension

OR

1. During the period of suspension of your Membership you are prohibited from wearing the uniform and insignia of the movement. You are further prohibited from participation in any SSA events in the role of an adult leader until the suspension is concluded. You must attend any required training that was agreed to be completed during this suspension

This suspension arises out of:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| *CHAIRMAN* |  | *Date* |

I hereby acknowledge receipt of the Suspension Notice

|  |  |  |
| --- | --- | --- |
|  |  |  |
| *Member* |  | *Date* |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| *Witness* |  | *Date* |

If the Member refuses to sign in acknowledgement of receipt of this Warning, it will be handed over in the presence of a witness who shall sign the form. The members refusal shall be recorded on the Form.