



# WITHDRAWAL FORM

SCHOOL \_\_\_\_\_ SCHOOL YEAR \_\_\_\_\_ DATE OF WITHDRAWAL \_\_\_\_\_

STUDENT \_\_\_\_\_ GRADE \_\_\_\_\_ RECEIVING SCHOOL \_\_\_\_\_

DAYS PRESENT \_\_\_\_\_ DAYS ABSENT \_\_\_\_\_

PERIODS	SUBJECT	GRADES TO DATE	MATERIAL RETURNED	TEACHER'S SIGNATURE
1				
2				
3				
4				
5				
6				
7				
8				

LIBRARY: \_\_\_\_\_ SPORTS: \_\_\_\_\_ OTHER ACTIVITIES: \_\_\_\_\_  
COMMENTS: \_\_\_\_\_

SIGNATURE OF PRINCIPAL \_\_\_\_\_ DATE \_\_\_\_\_