



Administrative Offices
2030 Swallow Hill Road
Pittsburgh, PA 15220
(412) 429-2201
(412) 429-2237 fax

Athletic Office
50 Thoms Run Road
Bridgeville, PA 15017
(412) 429-2244
(412) 276-5808 fax

Personnel
2030 Swallow Hill Road
Pittsburgh, PA 15220
(412) 429-2219
(412) 279-7956 fax

Public Relations
2030 Swallow Hill Road
Pittsburgh, PA 15220
(412) 429-2234
(412) 429-2280 fax

Special Education
2030 Swallow Hill Road
Pittsburgh, PA 15220
(412) 429-2639
(412) 279-7956 fax

Transportation
97 Thoms Run Road
Bridgeville, PA 15017
(412) 429-7011
(412) 276-8710 fax

High School
Grades 9-12
50 Thoms Run Road
Bridgeville, PA 15017
(412) 429-2241
(412) 276-5808 fax

Middle School
Grades 6-8
50 Thoms Run Road
Bridgeville, PA 15017
(412) 429-2220
(412) 429-2226 fax

Intermediate School
Grades 3-5
2030 Swallow Hill Road
Pittsburgh, PA 15220
(412) 429-2233
(412) 429-2380 fax

Primary School
Grades K-2
125 Thoms Run Road
Bridgeville, PA 15017
(412) 429-3270
(412) 429-7030 fax

Chartiers Valley School District

preparing our students for success

STUDENT WITHDRAWAL INFORMATION

STUDENT:

Last _____ *First* _____ *Middle* _____

Birth Date _____

Parent/Guardian _____

Relationship _____

STUDENT'S RESIDENCE WITHIN CHARTIERS VALLEY SCHOOL DISTRICT:

Street _____ *Post Office* _____ *Zip Code* _____

STUDENT'S NEW SCHOOL DISTRICT:

Name _____

Address _____

PERMISSION TO RELEASE STUDENT RECORDS:

Health and Dental _____ *Academic* _____ *Psychological* _____ *Other* _____

PARENT/GUARDIAN'S SIGNATURE:

STUDENT'S LAST DAY IN ATTENDANCE: _____

CHARTIERS VALLEY SCHOOL DISTRICT EXIT QUESTIONNAIRE

We wish you "GOOD LUCK" in your new school setting! It has been our pleasure to serve you during the time that you have attended the Charters Valley School District.

Before you leave, we would like to collect some information so that we can continue to provide a quality educational experience for our students. We hope that you have found the district to provide a purposeful and memorable experience for your child. With your input at this time, we can work to continually improve our services and seize opportunities for new approaches to serve the public better.

Thank you again.

EXIT DATE _____

1. Please check where your child will be receiving their education as they leave
Chartiers Valley School District.

☐ Public School ☐ Parochial School ☐ Private School
☐ Other _____

2. Please check the reason(s) for this change: (please check all that may apply)

☐ Job-related ☐ Relocation ☐ Financial
☐ School District ☐ Personal Reasons
☐ Other _____

3. I would recommend Chartiers Valley School District to others.
(check one)

☐ Strongly Disagree ☐ Disagree ☐ Undecided ☐ Agree ☐ Strongly Agree

4. If given the opportunity, I would again select Chartiers Valley School District
for my children. (check one)

☐ Strongly Disagree ☐ Disagree ☐ Undecided ☐ Agree ☐ Strongly Agree

5. Please comment on the quality of your child/children's educational experiences while at
Chartiers Valley School District.

6. Please check the grade level to which your child/children were assigned, as you left the
district:

K	1	2	3	4	5	6	7	8	9	10	11	12
---	---	---	---	---	---	---	---	---	---	----	----	----

GOOD LUCK AT YOUR NEW SCHOOL!