

**LAMPETER-STRASBURG SCHOOL DISTRICT**

1600 Book Road  
P. O. Box 428  
Lampeter, PA 17537  
Phone: (717) 464-3311  
Fax: (717) 464-4699

**STUDENT WITHDRAWAL / CHANGE OF INFORMATION**

Effective Date:  
(or last day of class, if moving) \_\_\_\_\_  
School Building: \_\_\_\_\_ Grade: \_\_\_\_\_  
Teacher's Name: \_\_\_\_\_

Student's Name: \_\_\_\_\_  
Parents' / Guardians' Names: \_\_\_\_\_  
Previous / Current Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

*Please check all that apply:*

**Change in Information:    New Information: (Only)**

Student's Name: \_\_\_\_\_  
Parents' / Guardians' Names: \_\_\_\_\_  
New Address: \_\_\_\_\_  
New Phone Number: \_\_\_\_\_  
New Alert Now Number: \_\_\_\_\_

**Transfer within District:**  From: \_\_\_\_\_  
To: \_\_\_\_\_

**Request to Withdraw:**  Reason: \_\_\_\_\_

New School District Name: \_\_\_\_\_  
New School District Address: \_\_\_\_\_

**Acknowledgement/Consent:** Parent/Guardian Signature: \_\_\_\_\_  
Print Parent/Guardian Name: \_\_\_\_\_

For Office Use:	Media/Library:	
	Cafeteria:	
	Locker and Lock:	
	Athletic Equipment:	
	PC: Census, Transportation, Student Accounting:	