LOS ANGELES UNIFIED SCHOOL DISTRICT Student Health and Human Services

NOTICE: This form is NOT to be used for students withdrawing to enroll in another LAUSD school (L2). Students are to be referred to the receiving school to enroll using the MiSiS Auto-Withdrawal Process.

Student's Name:		Date:	
D.O.B.:	Grade:	Student ID Number:	
l,		, declare that I am the parent/§	guardian/caregiver
of	and I am withdrawing this child from		due to
the Collection of the second			

the following reason:_____

Mark One	Reason for requesting withdrawal	Additional Information: Must provide city, state, and country, if unable to provide complete home and school address
	Enrolling in a non-LAUSD public school within the State of California (L3)	Name of new school:
	Enrolling in a private school (L4)	Address of new school:
	Moving to another state (L5)	New home address:
	Moving to another country (L5)	
	Other (L8): □Serious Personal Illness □ Deceased □Work □Other	New phone Number: Emergency contact name, relationship, phone number:

I assure you that I will enroll this child in a school within a reasonable period of time. I am aware of the compulsory education statute in California, as stated in Cal. Education Code Section 48200, that requires all children between the ages of 6-18 years old to attend a full-time educational program unless they are exempt. I also understand that if I fail to compel the attendance of the child in my care to attend a full-time education program while in the State of California, unless the child is exempt, that I may be subject to criminal penalties.

I declare under penalty of perjury under the laws of the State of California that the above statements are true and correct.

Parent/Guardian/Caregiver's Name	Parent/Guardian/Caregiver's Signature	Date			
Office Use Only					
Verification Document Attached:					
Enrollment Verification (L2, L3, L4, L5) Record Request (L2, L3,L4,L5)					
Class Schedule/Transcript (L3)					
Private School Affidavit (L4)					
□Out of Country: PAL with parent/guardian signature (L5)					
□Obituary, Death Notice, or PAL with parent/guardian signature (L8)					
Other Documentation/ L-Code					
Received by (Name/Signature/Date):					
Authorized by Administrator (Name/Signature/Date):					
Completed in MiSiS by (Name/Signature/Date):					
Notes:					