

- If using Internet Explorer (IE), fill out the form and email it back to our records clerk
- If you are using another browser (like Chrome, Safari, etc.) in order to complete the form and submit it, you will need to DOWNLOAD THE FORM before filling out



Name of School: Berkmar High School
School Address: 405 Pleasant Hill Rd.
 Lilburn, Ga. 30047

Revised 4/2020

Office Use Only: Cohort: _____
 Year: _____

WITHDRAWAL FORM

STUDENT NAME: _____ GRADE: _____

STUDENT ID #: _____

STUDENT NEW ADDRESS _____
Street City State Zip Code

Records release form signed by parent/guardian: Yes ___ No ___ (Only necessary if the student is leaving GCPS)

Is student placed in a special education program: Yes ___ No ___ If yes, specific program _____

PARENT'S PHONE # _____ PARENT'S EMAIL _____

STUDENT'S PHONE # _____ STUDENT'S EMAIL _____

SPECIFIC REASON FOR WITHDRAWAL / NEXT SCHOOL OF ATTENDANCE _____

WITHDRAWAL CODE (for school use only) Provide the name of school transferring to	
<input type="checkbox"/> W - Transfer to school in GCPS _____	<input type="checkbox"/> H - Attend Home School _____
<input type="checkbox"/> T - Transferred to Non-GCPS Public School _____	<input type="checkbox"/> J - Transferred Out of Country _____
<input type="checkbox"/> X - Transferred Out Of State _____	<input type="checkbox"/> O - Adult Ed/Post-Secondary (GED)
<input type="checkbox"/> K - Transferred to Private School _____	<input type="checkbox"/> R - Lack Of Attendance (Administration Use Only)

LIBRARY BOOKS RETURNED Yes ___ No ___

TITLE OF BOOK CHECKED OUT _____

COST OF BOOK _____

TEXTBOOKS RETURNED IN ALL COURSES: Yes ___ No ___

TITLE OF BOOK CHECKED OUT _____

COST OF BOOK _____

DATE WITHDRAWN _____ BIRTHDATE _____ AGE _____

STUDENT CURRENTLY ON SUSPENSION FROM SCHOOL Yes ___ No ___ NOTICE ATTACHED Yes ___ No ___

____ STUDENT HAS DISCIPLINARY RECORD WHICH WILL BE FORWARDED WITH ACADEMIC TRANSCRIPT

____ STUDENT DOES NOT HAVE DISCIPLINE RECORD

____ STUDENT HAS A STUDENT SUPPORT TEAM (SST) FOLDER

ADMINISTRATOR SIGNATURE _____

PARENT OR GUARDIAN SIGNATURE _____

If submit button does not work, email form to mauro.martinez@gcpsk12.org