

# PINE-RICHLAND SCHOOL DISTRICT WITHDRAWAL FORM

DATE: \_\_\_\_\_

EFFECTIVE AS OF: \_\_\_\_\_

STUDENT'S NAME	GRADE	BLDG.	CODE
STUDENT'S NAME	GRADE	BLDG.	CODE
STUDENT'S NAME	GRADE	BLDG.	CODE
STUDENT'S NAME	GRADE	BLDG.	CODE
STUDENT'S NAME	GRADE	BLDG.	CODE

REASON FOR WITHDRAWAL:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME OF SCHOOL TRANSFERRING TO: CITY: \_\_\_\_\_ STATE \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

NEW ADDRESS YOU CAN BE REACHED AT: PHONE NO. YOU CAN BE REACHED AT:  
HOME: \_\_\_\_\_  
CELL: \_\_\_\_\_  
WORK: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

**NOTE: Please be advised that your child will not be withdrawn from our school district until we receive request for records from the school district you are transferring to.**

\_\_\_\_\_  
SIGNATURE OF PARENT/GAURDIAN

\_\_\_\_\_  
SIGNATURE OF SCHOOL OFFICIAL

FOR OFFICE USE ONLY:

Notified Enrollment Coordinator of withdrawal: \_\_\_\_\_

Received request for records: \_\_\_\_\_ School: \_\_\_\_\_

Withdrawn from SASI: \_\_\_\_\_ Official Date of Withdrawal: \_\_\_\_\_

Notified Enrollment Coordinator of Office withdrawal date: \_\_\_\_\_

ENROLLMENT-District Withdrawal Form-8-20-07