

BEDFORD CENTRAL SCHOOL DISTRICT THE FOX LANE CAMPUS • P.O. BOX 180 MOUNT KISCO, NEW YORK 10549

STUDENT WITHDRAWAL FORM / RELEASE OF RECORDS

Name of Student to be Withdrawn	Current Grade	Date of Birth	Student ID #
Bedford Hills Bedford Village Mo	ount Kisco 🗌 Pound Ridg	ge West Patent Fo	ox Lane Middle School
 Transferring to another public school Transferring to a NON public school Transferring to a school outside of N Leaving the United States Country Transferred to Homeschooling 	in New York State Iew York State		
R	elease of Records		
Please send a copy of the checked records IEP – All confidential CSE records w Transcript			w:
Report Card To:	School		
Current Schedule	Address		
	Phone Number		
<u>C</u>	ther Information:		
Does the student have an Individualized Education Plan through the Committee of Special Education? 🗌 Yes 🗌 No			
Does the student have a current 504 Plan? Yes No			
*IMPORTANT: Please provide us with your new home address and email address. After the student has withdrawn, some State mandated test results will be returned to us and we are responsible for forwarding them to you.			
Email Address:			
New Home Address:			
ITEM/MATERIAL THAT IS PROPERTY of BCSD:			
HAS THIS PROPERTY BEEN RETURNED to BCSD? YES: NO:			
Will be withdrawing on			
Parent/Guardian Signature			Date