



2024-2025
BROWNSVILLE INDEPENDENT SCHOOL DISTRICT
PEIMS Department Withdrawal / Leaver Change Documentation Form

Local ID _____ Grade _____ Birth Place _____ D.O.B. _____ Sex _____ Status _____ Age _____

Student Name: _____
 (First) (Middle) (Last) (State ID#)

Address: _____
 (Street) (City) (State) (Home/Cell Phone # Must Verify)

Parent / Guardian Name: _____

Address: _____
 (Street) (City) (State) (Home/Cell Phone # Must Verify)

Other Contact Name: _____ Relationship: (Foster, CPS, Probation Officer, etc.)

Address: _____
 (Street) (City) (State) (Home/Cell Phone # Must Verify)

L E A V E R S	01	Graduated from a BISD Campus
	03	Died While Enrolled or during summer break
	08	Pregnancy: female or male WD because of Preg.
	16	Return to Home Country
	20	Medical Injury: assigned med. Or residential facility
	24	Enrolled in College working on Associate or Bachelor Degree
	60	Home School
	66	Removed by CPS
	78	Expelled Cannot Return (PEIMS ONLY)
	81	Enrolled TX Private School
	82	Enrolled Outside of TX
	83	Falsified Enrollment Infor. (PEIMS ONLY)
	85	Graduated Outside of TX
	86	GED Outside of TX
	87	WD to enroll TX TECH/UT HSEP
88	Court Ordered to a GED Program	
89	Incarcerated in State Jail or Federal	
90	Graduate Military – Interstate Compact	

This Section must be completed and signed

Withdrawal Date: _____

Withdrawal Code: _____

Comments: _____

PEIMS Admin. Signature: _____

Counselor Signature: _____

Registrar Signature (HS Only): _____

Leavers that are assigned a withdrawal code in red REQUIRE the following additional

Principal Signature: _____

At Risk Counselor Signature: _____

Drop Out Specialist Signature: _____

M O V E R S	*WCH	Enrolled in Local Charter School
	*WDH	Darrel Hester
	*WAA	Moved within BISD
	*17	Expelled to JJAEP
	*21	Inter-District Transfer
	*30	Entered Health Care Facility
	*31	Completed TX GED
	*61	Incarcerated Outside District
*80	Enrolled / TX Public School	

***Students with these leaver codes must meet with campus counselor and campus principal or designee
 Campus must document interventions.**

All fields MUST be filled in and original form placed in PRC and campus Leaver Binder.

D R O P O U T S	WRA	Runaway
	*02	Pursue a Job / Job Training
	*09	Marriage
	*10	Alcohol / Drug Abuse
	*14	Age
	*15	Homeless / Non-Perm Res
	*19	Met Grad Req. / Failed TX Assessment
	*22	GED / Alternative Program
*84	Academic Performance (PEIMS ONLY)	
*97	No Show (Dropout)	
*99	Other Reason (98)	

CHANGE OF LEAVER CODE

Complete this section if there is a change to the original withdrawal code

I, _____ am requesting that the LEAVER REASON CODE be updated from _____

_____ to _____ as per documentation received / obtained and reviewed by campus PEIMS Supervisor (copies of documentation attached).

PIEMS Data Management Clerk Signature: _____ Date: _____