



REYNOLDSBURG CITY SCHOOLS – IRN 047001

WITHDRAWAL FORM

– Reynoldsburg, OH 43068

Please be certain this form is signed by the parent/guardian or student over age 18

New School:

Please send
Records Release
promptly.

Please select school below:

- ☐ French Run Elem.
1200 Epworth Ave.
Tel (614) 367-1950
Fax (614) 367-1958
- ☐ Herbert Mills Elem.
6826 Retton Rd.
Tel (614) 367-2160
Fax (614) 367-2168
- ☐ Rose Hill Elem.
760 Rosehill Rd.
Tel (614) 367-2380
Fax (614) 367-2386
- ☐ Slate Ridge Elem.
10466 Taylor Rd. SW
Tel (614) 501-5500
Fax (614) 501-5520
- ☐ Summit Road Elem.
8591 Summit Rd.
Tel (614) 501-5530
Fax (614) 501-5699
- ☐ Taylor Road Elem.
8200 Taylor Rd.
Tel (614) 367-2930
Fax (614) 367-2933
- ☐ Waggoner Road Elem.
340 S. Waggoner Rd.
Tel (614) 501-5600
Fax (614) 501-5622
- ☐ STEM @ Baldwin Road
2300 Baldwin Road
Tel (614) 367-1600
Fax (614) 367-1625
- ☐ Waggoner Road Jr High
360 S. Waggoner Rd.
Tel (614) 501-5700
Fax (614) 501-5720
- ☐ RHS: Livingston Campus
6699 E. Livingston Ave.
Tel (614) 501-4000
Fax (614) 501-2260
- ☐ RHS: Summit Campus
8579 Summit Rd.
Tel (614) 501-2300
Fax (614) 501-2299

To be completed by custodial parent / legal guardian: PLEASE PRINT

Student Name: _____ Date of Birth: _____ Gender: ☐ M ☐ F

Reason for Withdrawal:

- ☐ Moving to another Public School District or Community School in Ohio ☐ Moving out of Ohio
- ☐ Student enrolling in a Private School within Ohio ☐ Pursuing GED
Requires School Administrator Approval
- ☐ Moving out of United States

New Home Address: _____
Street City State Zip

Parent / Guardian Name: _____
PLEASE PRINT

Parent email address(es) _____

Parent contact phone(s) (with area code) _____

Parent Signature x _____ Date: _____
Parent Signature Date

New School Information:

Name of School: _____ / _____
Name of New School Address / City / Zip

To be completed by school staff:

Student Summary Reynoldsburg City Schools

Entry Date: _____ Current Grade Level: _____

OH SSID#: _____ Custody Verification: _____

Reading Diagnostic Result (K-3) ☐ ON Track ☐ NOT On Track ☐ Not applicable

Attendance Intervention Plan ☐ Yes ☐ No

Pupil Services: special services

IEP ☐ Yes ☐ No

504 ☐ Yes ☐ No

gifted services

WEP ☐ Yes ☐ No

WAP ☐ Yes ☐ No

language services

ELL ☐ Yes ☐ No

Technology: device turned in ☐ Yes ☐ No ☐ Unknown

Please note: Student will remain on roster and attendance will be maintained until records release have been received from new school.

Administrator's Signature: _____ Date: _____

Superintendent's Signature: _____ Date: _____

Completed Copy to
Parent and Student File