



Office Use Only:		
Rcvd Date	Rcvd Date	Rcvd Initials

WITHDRAWAL FORM

STUDENT INFORMATION:

Student Name _____

Current Grade _____ Withdrawing from which year? _____

If current year, last date of school attendance: _____

Reason for withdrawal: _____

School student will enter: _____

PARENT INFORMATION:

Parent/Guardian Names: _____

Address: _____

Phone Number: _____

Email Address: _____

FINANCIAL INFORMATION:

Students are responsible for returning all school property upon their last date of attendance.

I, the undersigned, understand that all application and/or registration fees paid to date are non-refundable and non-transferable. After June 1st, the enrollment deposit is also non-refundable and non-transferable.

I understand that for a parent-initiated withdrawal for any reason, my financial responsibility is as follows:

- June 1 to July 31: 40% of the total yearly tuition
- August 1 to October 31: 60% of the total yearly tuition
- November 1 or after: 100% of the total yearly tuition

I understand that in the event of an administration-initiated withdrawal, including expulsion, no shows, or non-attendance without completing the withdrawal process, 100% of the total yearly tuition is due.

I understand that my child's school records may not be released to other schools until any unpaid balances are paid in full, including related fees for unreturned school property. I also understand that any account balance I have is due and payable within 30 days of withdrawal or according to a payment arrangement plan. Any refund due will be issued within 30 days of the official withdrawal date:

Parent/Guardian Name (print): _____

Parent/Guardian Signature: _____

Date _____

Admissions Director Signature: _____

Administrator Signature: _____

Date: _____