



# WITHDRAWAL FORM

## TABLE OF CONTENTS

Name of Child: \_\_\_\_\_ Classroom: \_\_\_\_\_

Date Form Completed: \_\_\_\_\_ Child's Last Day of Attendance: \_\_\_\_\_

Reason For Withdrawal: \_\_\_\_\_

Is your family interested in re-enrolling in the future?  Yes  No

If yes, when? \_\_\_\_\_

### PARENT OR GUARDIAN ACKNOWLEDGEMENTS REGARDING WITHDRAWAL

- ✓ I understand that by withdrawing from St. Paul's Christian School, I am releasing all rights to my child's placement.
- ✓ I understand that if my family wishes to re-enroll in the future, we will be placed on the waitlist in the appropriate order. No preference will be given to us as a previously enrolled family.
- ✓ I understand that I am responsible for paying the assessed withdrawal fee, if required. I also understand that all withdrawals require at least a one month written notice, and if I have not provided sufficient notice, I may also be assessed an additional fee equal to one month tuition.

Parent/Guardian Printed Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Office Use Only

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Child's Last Day of Attendance: \_\_\_\_\_

One Month Written Notice Provided:  Yes  No

Withdrawal Fee Required:  Yes  No Amount: \_\_\_\_\_

Additional Fee Required:  Yes  No Amount: \_\_\_\_\_

Waitlist?  Yes  No Future Registration Time Frame: \_\_\_\_\_