



STUDENT WITHDRAWAL FORM

STUDENT NAME _____

STUDENT # _____

STUDENT'S LAST DAY OF SCHOOL (W/D Date) _____

NEW SCHOOL ENROLLING TO: _____

New School address or phone number if available

Items to Consider For School & Parents	Action Taken
1- Have school fees been paid-will a pro-rated refund be necessary?	
2- Money in Payschools lunch account(s)- will a refund be necessary (NB Schools requests amounts less than \$5 be donated to the Backpack Program for students in need)	
3- Have all outstanding library materials or fines been returned?	
4- Have Chromebooks and textbooks been returned?	

Student's New Address to send any refunds:

PARENT/GUARDIAN SIGNATURE: _____

(Your signature gives New Bremen Schools permission to send student records including special education records to the new school)