



Fairfield Area School District

WITHDRAWAL FORM

(please fill out a form for each child)

Student's Name: _____ ID#: _____

Building: Elementary School Middle School High School Grade: _____

Address of New Residence: _____

Name, State & Country of New School: _____

I give permission for my child to withdraw from Fairfield Area School District. My signature is authorization and consent to send any necessary records to the school in which my child will be enrolling. I understand that Fairfield Area School District must comply with compulsory school attendance laws and no student can be withdrawn until enrollment verification from another educating institution is received.

Parent Signature: _____ Date: _____

-----School Office Use Only-----

Notification in Person Notification by Phone Notification by Note Notification from enrolling school

STATE WITHDRAWAL CODES (refer to PIMS Manual APPENDIX E)

| | | | |
|-------------|--|-------------|--|
| WD01 | Left without transferring or dropped out | WD06 | Student is deceased |
| WDO2 | Transferred to another public LEA or Cyber | WD09 | Enrolled but did not show |
| WD03 | Transferred to a private, non-public, or out of state/country school or homeschool | WD11 | Change in program, grade, residency status, etc. but stays in same school within the same school year |
| WD04 | Fulfilled graduation requirements or GED | WD12 | Change in program, grade, residency status, etc. resulting in a change in school within the same school year |

DROP OUT DATA (Circle only one) - High School Students only

| | | | |
|---------------------|-------------------------------|-----------------------|---------|
| A Academic problems | C Child, married or pregnancy | E Runaway or expelled | O Other |
| B Behavior problems | D Disliked school | F Wanted to work | |

PLANNED POST-DROPOUT ACTIVITY (Circle only one)

| | | | |
|---------------|-------------------------|--------------------|-----------|
| 120 Homemaker | 140 White collar worker | 160 Service Worker | 180 Other |
| 130 Military | 150 Blue collar worker | 170 Unemployed | |

FASD Withdrawal Date _____ **New School Enrollment Date** _____

Administrator Signature _____ **Date** _____