

WRITTEN CONSENT OF STUDENT WITHDRAWAL

(This form is to be used to provide, as required by law, written consent of a student and his/her parent or guardian to the student's withdrawal from school prior to the student's graduation or turning eighteen (18) years of age.)

NAME OF STUDENT: _____

ADDRESS: _____

GRADE/SCHOOL YEAR: _____

BIRTH DATE OF STUDENT: _____

DATE OF EXIT INTERVIEW: _____

NAME OF STUDENT'S PARENT/GUARDIAN: _____

ADDRESS OF PARENT/GUARDIAN: _____

I, _____, acknowledge that I wish to withdraw from _____ on _____, and have completed all the required steps to withdraw from school. I understand that withdrawing from school is likely to reduce my future earnings and increases my likelihood of being unemployed in the future.

(Date)

(Signature of Student)

(Date)

(Signature of Witness)

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I, _____, consent to the withdrawal of _____ from school on _____. I understand that withdrawing from school is likely to reduce _____ future earnings and increases his/her likelihood of being unemployed in the future.

(Date)

(Signature of Parent/Guardian)

(Date)

Signature of Parent/Guardian)

(Date)

(Signature of Witness)

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Determination of School Principal

I, _____, have received the request and acknowledgement of _____ to withdraw from school. I have determined that he/she is at least sixteen (16) years of age and that his/her parent(s)/guardian do not give his/her/their consent to the withdrawal of the student. Based upon the information available to me concerning the withdrawal of the student, it is my determination that _____

_____ should **not** be allowed to withdraw from school.

_____ should be allowed to withdraw from school.

(Date)

(Signature of Principal)

Adoption Date: July 27, 1992; Revised July 10, 2006