

North Boone

Community Unit School District 200

*Dr. Michael Greenlee, Superintendent
Julia Saunders, Director of Business Services*

Student Withdrawal Form

Student Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Attendance Site: _____

New Address: _____

City: _____ State: _____ Zip: _____

Date of Withdrawal: _____

Student is withdrawing with parent permission: _____ Yes _____ No

Reason for withdrawing: _____ Home school
_____ Transfer to another school
_____ Get GED
_____ Quit school completely
_____ Other: _____

District Transferring To: _____ Name of School: _____

Parent/Guardian Signature Date

Student has financial obligation to North Boone School District #200 _____ Yes _____ No

If student has financial obligation, explain here: _____
