Woodland Park School District A place of becoming

Notification of Intent to Withdraw

Mailing Address	Student's full name			
Phone Number Date of Birth Gender Current Grade Level School ID Number SASID Number Parent/Guardian's name Work phone number Email address Today's date Anticipated last date of attendance at current school First scheduled date of attendance in new educational program REASON FOR WITHDRAWAL (EXIT CODE): Transferring to another public school within Receiving Home-Based Instruction/ Home School outside the district (11)* Long term Illness/Serious Injury (30) Transferring to a public school outside of Colorado (14)* Drop out /discontinued schooling (40) Transferring to a public school (15) * Enrolling in a GED Program not run by a school district or BOCES (17)* * Please provide the following information if the student is transferring to another school or program Name of new school/program Street Address	Mailing Address			
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Colorado (14) * Transferring to a private school (15) * Please provide the following information <u>if the student is transferring to another school or program</u> Name of new school/program Street Address				Long term Illness/Serious Injury (30)
Transferring to a private school (15) School district or BOCES (17) * School district or BOCES (17) * Name of new school/program Street Address				Drop out /discontinued schooling (40)
Name of new school/program Street Address	Transferring to a private	e school (15) *		
Street Address	* Please provide the following	g information <u>if the stude</u>	ent is tra	ansferring to another school or program
	Name of new school/progra	am		
City	Street Address			
	City			
State	State			
Country (if other than US)	Country (if other than US)			

Date _____