

CHAMBERS COUNTY SCHOOL DISTRICT
NOTICE OF WITHDRAWAL

Date _____

Updated: June 1, 2023

Student's Name _____ Homeroom Teacher _____
Last First MI

Address _____
Street City State Zip Code

School Address _____
Street City State Zip Code

Race _____ School Currently Attending _____

Sex ____ Male ____ Female DOB: _____ Grade _____
mm/dd/yyyy

Date of Enrollment: _____ (current school year)
Month Day Year

Date Withdrawal Completed: _____ Student's State Number _____
Month Day Year

CHECK REASON FOR WITHDRAWAL

D0/Failed HS Grad Exam _____	WA1/Transfer in system-public school _____ (circle below)
D02/Academic Difficulties _____	Majority To Minority _____ Attending STEAM Program _____ Transportation Needed? Yes No
D03/Marriage _____	Medical _____ Special Education _____ Child Of Employee _____
D04/Pregnance _____	WA2/Transfer in system - private school _____
D05/Employment _____	WA3/Transfer in system - church or homeschool _____
D06/Physical Illness _____	WB1/Transfer in state - public school _____
D07/Language Difficulty _____	WB2/Transfer in state - private school _____
D08/Dislike of school experience _____	WB3/Transfer in state - church or homeschool _____
D09/Needed At Home _____	WC1/Transfer out of state _____
D10/Parental Influence _____	WD1/Withdrawn in order to complete an approved GED program _____
D11/Relations, student/staff _____	WD2/Deceased _____
D12/Relationship, fellow students _____	WD3/Disciplinary Action _____ Explain _____
D13/Entered Military Service _____	WD4/Transferred to Youth Service _____
D14/Behavior Problem _____	WD5/Transferred to Special Services _____
D15/Other Known Reason _____	WD6/Expulsion _____ Date of Expulsion Decision By Board _____ (month/day/year)
D16/Reason Unknown _____	WE1/Elementary-Reason Unknown _____

FEES/FINES/DUES OWED: Books _____ **Dues** _____
Fines _____ **Lunch** _____
Other _____ **TOTAL** _____

CURRENT SCHOOL YEAR ATTENDANCE RECORD: Days Present _____

Unexcused Absences _____ **Excused Absences** _____

Unexcused Tardies _____ **Excused Tardies** _____

Does student receive any of the following services:

____ **Special Education Services** ____ **Section 504** ____ **English As A Second Language (ESL)**

Parent Signature _____ **Date** _____

Student Signature _____ **Date** _____

(if age 17 or older at time of withdrawal)

Counselor/Principal Signature _____ **Date** _____

Date Withdrawal/Transfer Processed _____ (circle which one)

**In District Transfers will need to be sent to the Superintendent with the exception of Inspire Virtual Academy.*

IN DISTRICT TRANSFERS ONLY:

School Requesting Transfer To:

- | | |
|---|---|
| <input type="checkbox"/> Lafayette Eastside Elementary | <input type="checkbox"/> Huguley Elementary |
| <input type="checkbox"/> Fairfax Elementary | <input type="checkbox"/> Bob Harding Shawmut Elementary |
| <input type="checkbox"/> WF Burns Middle School | <input type="checkbox"/> JP Powell Middle School |
| <input type="checkbox"/> Lafayette High School | <input type="checkbox"/> Valley High School |
| <input type="checkbox"/> Inspire Academy (Virtual School) | |

Date Of Meeting Due To Transfer _____ **504/IEP//ESL (circle which one)**

Principal Of Receiving School (if transfer)

(Date)

If transferring for STEAM magnet school, how did you hear about the program? _____

APPROVED BY CHAMBERS COUNTY BOARD OF EDUCATION (In-District Transfers)

Superintendent's Signature

DISAPPROVED BY CHAMBERS COUNTY BOARD OF EDUCATION (In-District Transfers)

Superintendent's Signature

DEFINITIONS FOR PARENTS:

Majority to Minority

As a means of enhancing desegregation, Chambers County School District permits a student to transfer from a school where his/her race is in a majority to a school where his/her race is in a minority if space is available. A court decision could change school location(s).

Attending STEAM Program

As of August of 2022, Chambers County School District began implementing STEAM activities in grades 4-8 (to begin—other grade levels will be added) at the Eastside campus. The district will provide transportation for students on the Valley side who are interested in attending. Students will participate in STEAM activities throughout the school year.

IF TRANSFER IS OUT OF DISTRICT:

Name of School: _____ (school you will attend)

School Address: _____
Street City State Zip Code

SPECIAL INFORMATION ABOUT TRANSCRIPTS:

Transcripts will not be released until a written request is received from receiving school.

TRANSCRIPT REQUESTED			
School: _____		Date Of Request _____	
		mm/dd/yyyy	
Address: _____			
	City	State	Zip Code

