CHELMSFORD PUBLIC SCHOOLS

CHELMSFORD, MASSACHUSETTS

Official Withdrawal Notice

![MC900432636[1]]()

Name of Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ D.O.B. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GRADE \_\_\_\_\_\_ Student I.D.#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

House (CHS)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Counselor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Year of Graduation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

New Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I give my permission for the school listed below to forward my child’s\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Attendance/Conduct**

**Cumulative Records (which includes standardized test results, class rank, extracurricular activities, I.Q. scores, evaluation forms, teacher, Counselor, 766 evaluative materials, etc)**

 **All health records**

 **Special Education records and education plans to the above student**

**FROM:**

|  |
| --- |
|  **Byam Elementary School McCarthy Middle School** **25 Maple Road 250 North Road** **Chelmsford, MA 01824 Chelmsford, MA 01824** **978-251-5144 FAX: 978-251-5150 978-251-5166 FAX: 978-251-5130** **Center Elementary School Parker Middle School** **84 Billerica Road 75 Graniteville Road** **Chelmsford, MA 01824 Chelmsford, MA 01824** **978-251-5155 FAX: 978-926-0721 978-251-5133 FAX: 978-251-5140** **Harrington Elementary School Chelmsford High School** **120 Richardson Road, 190 Richardson Road** **North Chelmsford, MA 01863 North Chelmsford, MA 08163** **978-251-5166 FAX: 978-926-0792** **978-251-5111**  **South Row Elementary School**  **CHIPS PROGRAM** **250 Boston Road, 170 Dalton Road****Chelmsford, MA 01824 Chelmsford, MA 01863** **978-251-5177 FAX: 978-926-0383 978-251-5188 FAX: 978-926-2418** |

**REASON FOR LEAVING:**

\_\_\_ I will be transferring schools:

 Name of School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_New School District\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Town\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_

**\_\_\_**I am discontinuing attendance at school upon reaching 16 years of age

\_\_\_I will be completing my GED

**I DO HEREBY AUTHORIZE THE WITHDRAWAL OF THIS STUDENT FROM REGULAR ATTENDANCE AT CHELMSFORD PUBLIC SCHOOLS, CHELMSFORD MASSACHUSETTS**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Parent/Guardian/Student (if age 18) PRINT NAME Signature Dean and/or Principal

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian/Student (if age 18) SIGNATURE Date