

Jubilee Academies Charter School

Student Withdraw Request Form

Student Name _____ Date of Birth ____/____/____ Campus _____
First Last

Phone Number (____) _____ Social Security Number: ____/____/____ Grade _____

Current Address _____ City: _____ Zip: _____

Economic Disadvantaged: Y N

Special Education: Y N

Compulsory Attendance Law: *A child who is required to attend school under this section shall attend school each school day for the entire period the program of instruction is provided. Unless specifically exempted by Section 25.086 and who has not reached the child's 18th birthday shall attend school.*

I, _____ (parent/legal guardian) am withdrawing my child from school for the following reasons _____ and have provided the required documentation. I am withdrawing my child on _____ (day), _____ (month), _____ (year)

<input type="checkbox"/> Enrolled in another Texas Public School District (80) School District _____ School _____ Address _____ City _____ Zip _____ Phone Number (____) _____ <i>I understand that my child will be considered a dropout if not enrolled in another Texas Public School District.</i> Parent/Guardian Signature _____ Date _____ Administrator Approval _____ Date _____	<input type="checkbox"/> Enrolled in Private School (81) <input type="checkbox"/> Enrolled in a School outside of Texas (82) School Name _____ City _____ State _____ Zip _____ Phone Number (____) _____ Date enrolled at new school _____ Parent/Guardian Signature _____ Date _____ Administrator Approval _____ Date _____
<input type="checkbox"/> Home School (60) Date program began _____ Parent/Guardian Signature _____ Date _____ Administrator Approval _____ Date _____	<input type="checkbox"/> GED Program Date program began _____ At _____ Parent/Guardian Signature _____ Date _____ Administrator Approval _____ Date _____

Other Reason _____

Documentation Required: _____

Parent/Guardian Signature _____ Date _____ Administrator Approval _____ Date _____

Being aware of the Texas Compulsory Attendance Law, referenced above, I assume full responsibility for this student's education for the remainder of this school year. I also understand that all financial obligations must be cleared with the school. I further understand that if the school does not receive a request for records from the new school or notification of enrollment or completion of GED within 30 days of withdrawal, and the student is under 18, the school will report this to the courts as a truant case.

Signature of Parent/Guardian _____ Date _____

Forwarding Address and Telephone Number (Relative or friend who would be a contact for truancy proceedings, if needed)

Name _____ Phone Number (____) _____ Relationship _____

Address _____ City _____ State _____ Zip _____

For School Use Only - Leaver Tracking Information

Student ID _____ Date of Withdrawal _____ Leaver Code _____

Request for Records Received: Y N Date _____

Records sent to _____ School _____ Date _____

PEIMS Clerk Signature _____ Date _____