Alder Grove Charter School Withdrawal Form

Student Legal Name (last, first):							
Student Preferred name (last, first):							
Student Grade:	SPED	/504: Yes No					
Withdrawal Date:	(last day of	enrollment indicated	by "W" on a	ttendance	form)		
Reason for Withdrawal (circle one):	Graduated	CA Public School	Private So			Private Homeschool AAIM Meeting Result	
Moved Out of CA Moved Out o	f Country	Medical Reason	Other/Ur				
Onsite Classes: Yes No Or	site Class Drop F	Form Submitted:	es No				
Community Partners Specialist Noti	fied: Yes No						
Withdrawal Grades (Credits / Grade	s must be added t	o OASIS for grades 7-12)):				
COURSE TITLE				Mark Comple		Credits	
(Courses listed must match the Master Agreement and all Addendums)						Completed	
						(Grades 9-12 only	
		TOTAL CREDI	TS EARNED	\rightarrow			
I certify that the courses and cred			_				
attendance days: Teacher Signa							
Office Use Only:							
MIP Drop: OASIS D	rop:	_ CALPADS Drop:		Payroll Drop:			
Payroll Drop Director Confirmation:	Dis	trict Letter Sent:		VIA: F	ax En	nail USPS	
District Letter Not Sent Records Regu	iest Received fro	m Next School					