



ENGLEWOOD PUBLIC SCHOOL DISTRICT

Office Pupil Personnel Services
274 Knickebocker Rd, Englewood, NJ 07631
Phone (201) 862-6212 Fax (201) 862-6110

STUDENT WITHDRAWAL REQUEST FORM

School: check one

- Donald A. Quarles Early Childhood Center
- Dwight Morrow High School
- Dr. John Grieco Elementary School
- Dr. Leroy McCloud Elementary School
- Janis E. Dismus Middle School

Name of Parent(s) Guardian(s) _____

Your forwarding address: _____

Contact Phone Number: _____

Email: _____

Parent or Guardian must complete the following information below about the student's transfer and sign the form.

Name of Student _____ Grade _____

School where child will attend:

Street Address _____

City _____ State _____ Zip Code _____

Last Date of Attendance for the Student

Please check the type of transfer:

- ___ T3 — changed to a nonpublic school within the state
- ___ T4 — moved to another public school outside the district
- ___ T6 — enrolled in a state-approved education program in a state institution while incarcerated
- ___ T7 — enrolled in a state-approved education program in a state institution for treatment of a physical, mental or emotional disability
- ___ T8 — moved out of the state or country to a public or nonpublic school
- ___ T9 — officially withdrew from school to receive an equivalent program of instruction provided by parents
- ___ TC — transferred to an approved charter school
- ___ TD — transferred to an approved choice school
- ___ TA — transferred to alternative adult education
- ___ TP — transferred to private facility
- ___ TR — transferred to a renaissance school
- ___ D9 --- Deceased - the signature of the parent or guardian attesting that the student is deceased.

Parent/Guardian Signature _____