

BUCKEYE LOCAL SCHOOLS STUDENT WITHDRAWAL FORM

NAME _____ GRADE _____ ID _____

DATE OF WITHDRAWAL _____ # CODE FROM BELOW _____

FORMER ADDRESS _____

NEW ADDRESS _____

NEW SCHOOL NAME _____

NEW SCHOOL ADDRESS _____

NEW SCHOOL DISTRICT IRN _____

The undersigned acknowledges the above mentioned student is withdrawing from the Buckeye Local School District on the above-mentioned date. The undersigned also gives permission to the school to release records to the school mentioned above.

Parent or Guardian

Withdraw/Dropout/Truancy Reason

- 36 Withdrew from Preschool (for any reason)
- 37 Withdrew from Kindergarten
- 40 Transferred to another school district out of Ohio
- 41 Transferred to another Ohio school district—local, exempted village, city or community school.
- 42 Transferred to a private school
- 43 Transferred to home schooling
- 44 No Longer Used
- 45 Transferred by Court Order/Adjudication (if court has designated a public district other than yours as district responsible for paying for the education) or if student was placed in an institution operated by Dept. of Youth Services (DYS)
- 46 Transferred out of the United States
- 47 Withdrew pursuant to Yoder vs. Wisconsin
- 48 Expelled
- 51 Verified Medical Reasons (doctor's authorization on file)
- 52 Death
- 71 Withdrew due to truancy/nonattendance
- 72 Pursued employment/work permit (Supt. approval on file)
- 73 Over 18 years of age
- 74 Moved; not known to be continuing
- 75 Completed Course Requirements (Has not passed all of OGT sections)
- 99 Completed Grad Requirements