

# WITHDRAWAL

**TWINSBURG HIGH SCHOOL**  
**10084 RAVENNA RD**  
**TWINSBURG, OHIO 44087**  
**(330) 486-2400**  
**FAX- (330) 405-7406**

# WITHDRAWAL

**STUDENT: YOU MUST COMPLETE ALL ITEMS AND RETURN TO THE GUIDANCE OFFICE BEFORE LEAVING ON YOUR LAST DAY**

**TEACHER: USE INK! Enter course name, sign under teacher, give withdrawal grade, enter yes/no for books returned, fees paid, and any additional information.**

Student Number	Last Name	First Name	M.I.	Last Day of Attendance			
Grade Level	Birthdate	Withdrawal Date	Withdrawal Code	Parent Signature			
Parent's Name & New Address			Name, Address and Phone Number of New School				
Parent's Phone Number			Reason for Withdrawal				
COURSE	TEACHER	W/D GRADE	BOOKS RETURNED		FEES PAID		ADDITIONAL NOTES
			YES	NO	YES	NO	

Library Fees	YES	NO	Amount Owed	Signature
Office Fees				

**OFFICE USE ONLY:**  
 \_\_\_ Attendance \_\_\_ Full Schedule \_\_\_ Marks \_\_\_ Current Grades \_\_\_ Locker # \_\_\_\_\_  
 \_\_\_ Transcript \_\_\_ Photo Page \_\_\_ Lock Returned

Revised 02/01/2010

**Students are advised that no report of courses/grades will be transferred to their permanent record or sent via transcript to another educational institution until fees and financial obligations are satisfied.**