



Nantucket Public Schools
10 Surfside Road
Nantucket, MA 02554
508-228-7285 (P)
508-325-5318 (F)

STUDENT WITHDRAWAL FORM

Student Name: _____ **Date of Birth:** _____
Last First MI

Grade: _____ **Homeroom Teacher:** _____ **Withdrawal Date:** _____

Reason For Withdrawal:

- Transfer to another public school (in state)
- Transfer to private school
- Transfer out of state
- Home School
- Other: _____
- Absent 15 consecutive days

Method of Notification:

- Parent/guardian signed form below
- Parent/guardian email notification (attach)*
- Parent/guardian verbal confirmation*
Spoke with: _____
- Receipt of Record Release from next school*
- Letter from next school confirming enrollment*

**Parent must sign when possible; use these options sparingly*

New Home Address: _____

Name of New School: _____

Phone of New School: _____ **Fax of New School:** _____

Address of New School: _____

Parent/Guardian Signature

Date

Principal Signature

Date

For official use only

Counselor: Withdrawal Completion Checklist

- ___ Print Schedule for File
- ___ Final Report Card/Progress Report in file
- ___ Final Report Card/Progress Report Run & Saved in Aspen
- ___ Withdrawal from Aspen
- ___ Initials

Please return this form to the Front Office of School.



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STUDENT WITHDRAWAL CHECKLIST

Please make sure that the following have been returned to the proper school personnel and that this form is completed and signed before leaving the school system.

Student Name: _____

English	<input type="checkbox"/> Assignments <input type="checkbox"/> Text Books <input type="checkbox"/> Materials	Library: _____ Books turned in _____ (Initials of Librarian)
Math	<input type="checkbox"/> Assignments <input type="checkbox"/> Text Books <input type="checkbox"/> Materials	Cafeteria: \$ _____ _____ (Initials of Food Service Director)
Social Studies	<input type="checkbox"/> Assignments <input type="checkbox"/> Text Books <input type="checkbox"/> Materials	Chromebook/Charger: _____ _____ (Initials of Tech Specialist or Director)
Science	<input type="checkbox"/> Assignments <input type="checkbox"/> Text Books <input type="checkbox"/> Materials	Locker: ___ School - Cleaned out Locker: ___ Gym Cleaned out / Lock (Initials of Front Office/AD)
Forms	<input type="checkbox"/> School Withdrawal Form <input type="checkbox"/> Records Release Form (from next school)	

Student Signature

Date

Parent/Guardian Signature

Date

Principal Signature

Date

Please return this completed form to the Counseling Department.



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ADDENDUM TO THE WITHDRAWAL FORM

Student Name: _____

Category	Subject	Teacher	Signature	Grade to Date	Date
Math					
English					
Social Studies					
Science					
Language					
Electives					

To Whom it May Concern:

The above student has officially withdrawn from Nantucket High School. This should serve as an addendum to his/her/their transcripts and report cards.

Sincerely,

School Counselors

Please return this completed form to the Counseling Department.