## GADSDEN'INDEPENDENT SCHOOL DISTRICT

## **Student Withdrawal Form**

School Name:		School Fax:		Phone:	
School Address:		City:		, NM	Zip:
			_		
Student Name:			ID #:		
Address:	City:_		State:	Zip:_	
Grade:Date of Bir	th:	_Gender:	Phone:		×
Withdrawal Date:		Withdrawa	l Code:		
Reason for Withdrawal:					
					*
Exit Comment:					
01 15 41					
Language Classification:					
Parent/Guardian's Name (P	Print):				
Parent Signature:			=0		
		Signatures	ì		Date
Principal					
Data Entry Clerk					
Attendance Clerk					
Registrar					5
Counselor					
Nurse					
Librarian					
Bookkeeper(High School)					

- Attach copy of current grades from PowerSchool
- Attach Attendance from PowerSchool
- Attach supporting documents for any fees owed

White (Cum) Office

Yellow: Data Clerk/Registrar

Pink:Parent