

Department of Defense Dependent Schools Sembach Elementary School Unit 29060 APO AE 09136



Today's Date: _____

STUDENT WITHDRAWAL FORM

Student's Name:	Grade:
I wish to withdraw my student from Sembach Eleme	entary School effective
for the following reason (please select one):	(Student's Last Day)
PCS Move	
Moving Student to the States	
Moving student to another district school (Ramst Other (please state):	
PCS orders are required or statement ind	
Parent Printed Name:	
Parent Signature:	
Parent Email Address:	
Forwarding Address:	
Records will be available for pickup after 2:30 on the withdrawals on the last day of school. Pickup details higher volume. Adjusted pick up time/date will be confident and time set by Registrar	for these will be adjusted due to ommunicated.
To Be Completed at Records Pickup:	
Student is cleared from: \square Cafeteria \square Library \square Chro	mebook, bag, and power cord
I have received the packet containing my child's s (Initial) packet must remain sealed and delivered to my c	

Sembach Elementary School does not retain copies of student records that do not pertain to elementary school.

For Official Use Only - Privacy Act of 1974

For Official Use Only Cumulative Record Hand Carried

Date Received:

Registrar's Initials:

Orders Received: Y/N Grades Verified: Y/N