



# Madeira City Schools Student Withdrawal Form

Student Name \_\_\_\_\_ SSID \_\_\_\_\_

Building \_\_\_\_\_ ID# \_\_\_\_\_

Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_ Withdrawal Date \_\_\_\_\_

Name of New School \_\_\_\_\_

School Address \_\_\_\_\_

This permission only applies to the school listed above.

Cafeteria Charges Paid: Yes \_\_\_\_\_ No \_\_\_\_\_ Authorized Signature \_\_\_\_\_

School Fees/Fines Paid: Yes \_\_\_\_\_ No \_\_\_\_\_ Authorized Signature \_\_\_\_\_

Extracurricular Fees Paid: Yes \_\_\_\_\_ No \_\_\_\_\_ Authorized Signature \_\_\_\_\_

Subject Taken (this semester)	Grade Earned (this 9 weeks)	Textbooks Returned Yes or No If no, provide book title	Teacher Signature

By signing below, I am requesting permission to withdraw the above named student from Madeira City Schools. I understand that this form must be completed and signed by the appropriate school personnel and that the Ohio Revised Code, Section 3313,642 states that the collection of unpaid fees and charges may be enforced by withholding of grades and credits.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Counselor Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_

Madeira City Schools District IRN-044289

OVER

### Exit Survey

If you are leaving Madeira City Schools for another school: Please check the one that most accurately applies to your situation.

- |   |   |
|---|---|
| <input type="checkbox"/> Another Public School – Moving         | <input type="checkbox"/> Homeschooling          |
| <input type="checkbox"/> School Outside of Ohio – Moving        | <input type="checkbox"/> Public Online School   |
| <input type="checkbox"/> School Outside of the Country – Moving | <input type="checkbox"/> Private/Charter School |

Other / Further Explanation: \_\_\_\_\_

Please rate your educational experience with Madeira City Schools.

- 5 – Very Positive experience, no complaints
- 4 – Positive experience, some complaints
- 3 – Neutral, not better or worse than other experiences
- 2 – Dissatisfied, many complaints
- 1 – Highly dissatisfied, no positive experiences

-----SCHOOL USE ONLY-----

Code	EMIS Code	Name	Description
**	**	NOT APPLICABLE (DID NOT WITHDRAW)	NOT APPLICABLE (DID NOT WITHDRAW)
36	36	COMPLETED PRESCHOOL PROGRAM	COMPLETED PRESCHOOL PROGRAM
37	37	WITHDREW FROM KINDERGARTEN	WITHDREW FROM KINDERGARTEN
40	40	TRANSFERRED TO SCHOOL OUTSIDE OF OHIO	TRANSFERRED TO SCHOOL OUTSIDE OF OHIO
41	41	TRANSFER TO ANOTHER OHIO SCHL DIST, LOCL, EX, OR CITY	TRANSFER TO ANOTHER OHIO SCHL DIST, LOCL, EX, OR CITY
42	42	TRANSFER TO PRIVATE SCHOOL	TRANSFER TO PRIVATE SCHOOL
43	43	TRANSFER TO HOME SCHOOLING	TRANSFER TO HOME SCHOOLING
45	45	TRANSFER BY COURT ORDER/ADJUDICATION	TRANSFER BY COURT ORDER/ADJUDICATION
46	46	TRANSFERRED OUT OF UNITED STATES	TRANSFERRED OUT OF UNITED STATES
47	47	WITHDREW PURSUANT TO YODER VS. WISCONSIN	WITHDREW PURSUANT TO YODER VS. WISCONSIN
48	48	EXPELLED	EXPELLED
51	51	VERIFIED MEDICAL REASON (DR. AUTHORIZED)	VERIFIED MEDICAL REASON (DR. AUTHORIZED)
52	52	DEATH	DEATH
71	71	WITHDREW DUE TO TRUANCY/NON-ATTENDANCE	WITHDREW DUE TO TRUANCY/NON-ATTENDANCE
72	72	PURSUE EMPLOYMENT/WORK PERMIT	PURSUE EMPLOYMENT/WORK PERMIT
73	73	OVER 18 YEARS OF AGE	OVER 18 YEARS OF AGE
74	74	MOVED, NOT KNOWN TO BE CONTINUING EDUCATION	MOVED, NOT KNOWN TO BE CONTINUING EDUCATION
75	75	COMPLETED COURSES/DID NOT PASS PROFICIENCY	COMPLETED COURSES/DID NOT PASS PROFICIENCY
99	99	COMPLETED GRAD REQUIREMENTS/PASSED ASSESSMENTS	COMPLETED GRAD REQUIREMENTS/PASSED ASSESSMENTS
151	151	RESIDENT OPEN ENROLLED ELSEWHERE FULLTIME	RESIDENT OPEN ENROLLED ELSEWHERE FULL TIME

Please check the following:

- Copy of Transcript from Counselor
- Health Records from Clinic
- Withdrawal Form Completed and Signed
- Received confirmation of enrollment from New School
- EMIS Coded & Schedule Removed from Computer
- Notification sent to:
  - o Transportation
  - o Technology Department

School Office Use

Records Request Received \_\_\_\_\_  
 Records Sent \_\_\_\_\_  
 Withdrawal Code Used \_\_\_\_\_