

BERLIN BROTHERSVALLEY SCHOOL DISTRICT

1025 Main Street, Berlin, PA 15530 814-267-4621 Fax:814-267-6060

Withdrawal Form

APPLICATION DATE: _____

OFFICIAL WITHDRAWAL DATE: _____

In accordance with file maintenance of both the Power School Computer System and the Enumeration Report, notice is hereby given that the following named student has withdrawn from attendance in the Berlin Brothersvalley School District.

Student Information

Student Name:

Last First Middle Suffix

Home Address:

Street Address City State ZIP Code

Birth Date:

_____ Current Grade: _____ Home Room: _____ Bus Route: _____

Withdrawal Notice

Please indicate why the student is withdrawing from Berlin Brothersvalley School District:

Parent/Guardian Signature

By signing this form, I am withdrawing my student from Berlin Brothersvalley School District, Berlin, PA.

Signature of Parent/Guardian: _____

Date: _____

School Official Completes

appropriate withdrawal code

WD01	Student left school without transferring, dropped out or exited due to maximum age not completed.
WD02	Student transferred to another public local educating agency (LEA).
WD03	Student transferred to a private or nonpublic school or out of the state of PA, or out of the US.
WD04	Student fulfilled graduation requirements. Received some other recognized credential, such as a certificate of attendance, GED, or exited due to maximum age and completed.
WD06	Student deceased.
WD09	Student enrolled but did not show.
WD11	Student stayed within same school/location.
WD12	Student changed to a different school/location.

PA Secure ID: _____

Student #: _____

Processed by: _____

Date: _____

Forms Sent To Appropriate Office:

<input type="checkbox"/>	Building Office, Secretary
<input type="checkbox"/>	Rocky Ritchey, Nurse
<input type="checkbox"/>	Turner Paul, PIMS
<input type="checkbox"/>	Cathy Berkebile, Food Services
<input type="checkbox"/>	Lori Gindlesperger, Transportation