

**BETHEL LOCAL SCHOOL  
7490 S. STATE ROUTE 201  
TIPP CITY, OHIO 45371**

WITHDRAW DATE \_\_\_\_\_

The student named below is withdrawing from school for reasons stated. Teachers are asked to collect texts, record an estimate of the student's grade and note any fines on this form under "Comments". RECORDS WILL NOT BE RELEASED UNTIL ALL REQUIREMENTS HAVE BEEN COMPLETED PROPERLY.

STUDENT \_\_\_\_\_ DOB \_\_\_\_\_ AGE \_\_\_\_\_ GRADE \_\_\_\_\_

REASON FOR WITHDRAWAL \_\_\_\_\_

NEXT HOME ADDRESS \_\_\_\_\_  
STREET/P.O. BOX CITY STATE ZIP

NEXT SCHOOL ADDRESS \_\_\_\_\_  
NAME STREET STATE ZIP

**1. Report to teachers to return textbook and receive withdrawal grade. Teacher must sign form.**

PERIOD	CLASS	WITHDRAWAL GRADE	TEXT RETURNED	TEACHER SIGNATURE
1				
2				
3				
4				
5				
6				
7				
Library				
Office				

**2. Report to the Library. Return all books and materials checked out. Have Librarian/Media Aide sign form.**

**3. Report to the Middle School Office. Pay all outstanding fines. Have Secretary sign form.**

When all obligations to the school have been fulfilled student records may be released to the agency(s) specified by the parent or guardian of the above name student – or by the student who is of legal age.

\_\_\_\_\_  
Counselor or Principal

\_\_\_\_\_  
Parent/Guardian or Student

Comments \_\_\_\_\_  
 \_\_\_\_\_