



WESTWOOD PUBLIC SCHOOLS
Official Student Data Withdrawal Form

Parent/Guardian please complete the information below. Please complete one form per student.

Legal Name of Student: (First) _____ (MI) _____ (Last) _____ Grade _____

Reason for withdrawal: (Check only one) – Student(s) must be enrolled in another school in a timely manner according to the federal mandatory school attendance law.

_____ Moving to another school district in MA: Name of School District _____ City: _____
including Vocational Technical/Agricultural schools

_____ Moving to a school district out of state: Name of District: _____ City: _____ State/Country: _____

_____ Enrolled in a private school: Name of school: _____ City: _____ State: _____

_____ I intend to Home School my child(ren) – Please note that you must complete and submit an Education Plan to the Asst. Superintendent's office

_____ My student is withdrawing from school – Please note that school attendance is compulsory until age 16.

Forwarding address: _____ City _____ State _____ Zip _____

Legal Name of Parent/Guardian (please print): First _____ Middle Initial _____ Last _____

Signature of Parent/Guardian _____ Date _____

Check if documents are attached

FOR OFFICE PERSONNEL ONLY: Parent did not complete top section. Supporting documentation is attached.

Name of School (last attended) _____

Student ID#: _____ Date of Student Birth: Month _____ Day _____ Year _____

Withdrawal date: Month _____ Day _____ Year _____ Withdrawal code: _____

Last day of attendance: Month _____ Day _____ Year _____

School records have been requested: Yes ___ No ___ Date requested: Month _____ Day _____ Year _____

Records sent to: _____

Date sent: _____ By: mail ___ Fax ___ Email _____

Staff who helped with completion of the form: _____ Date: _____

FEES/EQUIPMENT RETURN:

Food Service balance paid Books returned/Fees paid Chromebook returned Athletic equipment returned