Cleveland Middle School Withdrawal Form



To be completed by parent or legal guardian			
Student Name:	tudent Name: Grade:		
Student Date of Birth:	tudent Date of Birth: Last Day at CMS:		
Reason for Withdrawal:			
Name of New School: City, State:		City, State:	
New School is: Public, Private, or Charter School Online/Virtual School Homeschool			
Signature: Today's Date:			
To be completed by student before leaving CMS			
⊕ Item(s)	Turn in to:		
iPad/Charger ⇒	Sarah Bryson (Room 932) or Alicia Klepper (Room 845)	X	
Library Books ≎	Tamara Humphres or Melinda Rodgers	X	
Textbooks⇒	Homeroom Teacher	X	
Outstanding Fees ⇒	Amanda Carter (Room 130)	х	

STUDENTS - After collecting signatures above, please return this form to the counseling office (Room 120)



We wish you and your family all the best in your future endeavors!



To be completed by Counseling Office			
Student Number:	Proof of Enrollment Received:		
Withdrawal Completed:	Records Sent:		
☐ Tennessee Public, Private, Charter School ☐ Tennessee Online/Virtual School ☐ Independent Homeschool in Tennessee	□ Out of State Public, Private, Charter School □ Out of State Online/Virtual School □ Out of State Independent Homeschool		
OTHER: Court Order State Insti	tution/Custody Doctor Certified		