

Windham Public Schools  
355 High Street, Unit B  
Willimantic, CT 06226  
Phone: (860) 465-2310  
Fax: (860) 465-2311

## STUDENT TRANSFER/WITHDRAWAL FORM

(Please Print)

Today's Date:    /    /

Student ID:

### PERSONAL INFORMATION

Student's Last Name:

First:

Middle:

Birth Date:

    /    /

Parent's Last Name:

First:

Middle

Street Address:

Phone No.:

(    )

P.O. Box:

City:

State:

ZIP Code:

### TRANSFER/WITHDRAWAL INFORMATION

Name of Last Windham Public School Attended

Last Date Attended Windham Public Schools

    /    /

Name of School Transferring To

First Date Attending New School

    /    /

Street Address:

Phone No.:

(    )

City:

State:

ZIP Code:

### SIGNATURES

*Patient/Guardian Signature*

*Date*

    /    /

*WPS Staff Signature*

*School/Department*

*Date*

    /    /

*Office use only*

*SASID:*

REV: 42022

ACKNOWLEDGEMENT OF OPTION TO WITHDRAW CHILD SEVENTEEN  
YEARS OF AGE FROM SCHOOL

Pursuant to Section 10-184 of the Connecticut General Statutes,

I \_\_\_\_\_ of \_\_\_\_\_  
**Name of Parent, Guardian or other** **Address**

the parent, guardian or other person charged with the care of the following minor child

\_\_\_\_\_ of \_\_\_\_\_  
**Name of Child** **Address**

born on \_\_\_\_\_ do hereby elect to withdraw my child from  
**Date of Birth**

public schools.

Furthermore, before signing this form, a representative of the Windham school district has met with me and provided me with information concerning the educational option available in the school system and the community.

ATTESTMENT BY:

\_\_\_\_\_  
**Signature of school administrator/counselor**

\_\_\_\_\_  
**Date**

ACKNOWLEDGED BY:

\_\_\_\_\_  
**Signature of Parent, Guardian or Other**

\_\_\_\_\_  
**Date**

*A child seventeen years of age or older who voluntary terminates enrollment in a school district and subsequently seeks readmission, the local or regional board of education for the school district may deny school accommodations to the child up to ninety school days from the date of such termination. Unless the child seeks readmission to the school district not later than ten days after the termination in which case the board shall provide school accommodations to the child not later than three school days after the child seeks readmission.*

*Office use only*

SASID:

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