



OFFICIAL NOTICE OF WITHDRAWAL FORM

HOMEWOOD HIGH SCHOOL
1901 South Lakeshore Drive Homewood, AL 35209
Phone: (205) 871-9663 Fax: (205) 423-2493 (Attn: Dayna Neece)
Email: dneece@homewood.k12.al.us

Student's Last Name: _____ First Name: _____ MI _____

Forwarding Mailing Address: _____

City _____ State _____ ZIP _____

Date of Birth: ____/____/____ Gender: ___ Male ___ Female Grade Level: _____

Race: ___ Black ___ White ___ Asian ___ American Indian/Alaskan Native ___ Native Hawaiian /Pacific Islander

Transfer School Type: ___ Public ___ Private ___ Church/Homeschool

Name of Transfer School District: _____

Name of Transfer School: _____

Transfer School Address: _____

City _____ State _____ ZIP _____ Country _____

Withdrawal Date: ____/____/____

PARENT/CUSTODIAN AUTHORIZATION

This is to authorize and request that the above named student be withdrawn from this school and records be forwarded to the receiving school. *A parent/custodian signature is required.

*Parent/Custodian Signature: _____ Date: ____/____/____

PRINT: Parent/Custodian Legal Name: _____

Registrar: _____ Date: ____/____/____

Principal (Optional): _____ Date: ____/____/____

This form must be submitted to school officials and filed at the child's school to be valid.



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Student's Last Name: _____ First Name: _____ MI _____

Check if applicable: _____ IEP _____ Gifted _____ EL _____ 504 _____ HSSP

ATTENDANCE

Days Enrolled _____ Days Present _____ Days Absent _____ Days Tardy _____

COVID 19 Learning Platform: Virtual _____ Traditional _____

STUDENT CLEARANCE

_____ After the Bell/EDP _____ Device(s) Return _____ Library
_____ Locker _____ Lunchroom _____ Nurse
_____ Office/Bookkeeper _____ Parking Pass Turned In _____ Textbooks

Items provided to Parent/Guardian at Withdrawal or Sent to the Transfer School

Table with 4 columns: Attendance Records, Most Recent Report Card, Immunization Card, Student Profile(from SIS), Current Grades, Unofficial Transcript, Birth Certificate, Other, Current Class Schedule, Discipline Records, Social Security Card.

Table with 6 columns: Period, Course, Teacher, Initials, Clear, Withdraw Grade. Rows 0/HR, 1-8.

This form to be completed by school officials to be valid.