Norwayne Local School District
Norwayne Elementary School Withdrawal Form
186 South Main Street
Creston, OH 44217

Phone: 330-435-6383 Fax: 330-435-4633

Name:			Grade:			Date of Birth:		
NewAddress:								
New School:								
Telephone #:			]	Last Day of	f Attendance:			
Parent/Guardia	n Signature:						Date:	
Please obtain s	signatures from the	he foll	owing:					
Period			irrent rade	_ , _ ,		Remarks		Teacher Signature
1								
2								
3								
4								
5								
6								
7								
8								
Library Aide:					Counselor:			
School Fees:			Cafeteria	Fees:	Lo		Locker Cleaned Out:	
Reason for Wi	thdrawal:	_						
<ol> <li>Moved-transferring to another school</li> <li>Change of parental custody</li> <li>Work permit</li> </ol>				<ul><li>4. Placed in foster home</li><li>5. Change in foster/court placement</li><li>6. Enrolling in Community (Online) School</li></ul>				
Other								

Norwayne Local School District Norwayne Middle School Withdrawal Form 350 South Main Street Creston, OH 44217

Phone: 330-435-1195 Fax: 330-435-4633

Name:			Grade:			Date of Birth:		
NewAddress:								
New School:								
Telephone #:	L	Attendance:						
Parent/Guardia			Date:					
Please obtain	signatures from	the foll	owing:					
Period	Course		rrent		oom Issued Returned No		Remarks	Teacher Signature
1								
2								
3								
4								
5								
6								
7								
8								
Library Aide:					Counselor:			
School Fees:			Cafeteria F	ees:		Locker Cleaned Out:		t:
Reason for W	ithdrawal:							
<ol> <li>Moved-transferring to another school</li> <li>Change of parental custody</li> <li>Work permit</li> </ol>				<ul><li>4. Placed in foster home</li><li>5. Change in foster/court placement</li><li>6. Enrolling in Community (Online) School</li></ul>				
Other								

Norwayne Local School District
Norwayne High School Withdrawal Form
350 South Main Street
Creston, OH 44217

Phone: 330-435-6384 Fax: 330-435-4633

Name:			Grade:		Date of Birth:		
New Add	ress:						
New Scho	ool:						
Telephon	e #:		Last D	ay of Attendance:			
Parent/Gu	ardian Signature:			Date:			
Please ob	tain signatures fro	m the follow	wing:				
Period	Course	Current Grade	Fees Due	Classroom Issued Book Returned	Remarks	Teacher Signature	
1							
2							
3							
4							
5							
6							
7							
8							
9							
			l				
School Fees:			afeteria Fees:		Locker Cleaned Out:		
Reason fo	or Withdrawal:						
<ol> <li>Moved-transferring to another school</li> <li>Change of parental custody</li> <li>Work Permit</li> <li>Over 18 years of age</li> </ol>				<ul><li>5. Placed in foster home</li><li>6. Change in foster/court Placement</li><li>7. Enrolling in Community (Online) School</li></ul>			
Other							
Please ret	urn form to High	School Offi	ce.				