**Student Withdrawal Form**

COLORADO SPRINGS CHARTER ACADEMY

2577 N. Chelton Rd. Colorado Springs, CO 80909 719-636-2722

**Today’s date**   **Last date at CSCA**

mm / dd / yyyymm / dd / yyyy

**1st date of attendance at new educational program**

 mm / dd / yyyy

 ***Student Last* *Name*  *First*   *Middle***

**Student DOB**   **Gender** Male Female **Grade**

 mm / dd / yyyy

**Family Home Cell**

**Contact Phone Phone**

**Home**

**Address**   **City Zip**

**Transferring to:**

 D11 Colorado, but outside of El Paso County

 Transferring out of state or country Transferring to private school

 Academy 20 Transferring to online program

 Cheyenne Mt D12 Receiving home-based instruction/home schooling

 Falcon D49 Other (please specify)

 Harrison D2

 Manitou Springs D14

 Other El Paso County District

**Briefly explain your reason for withdrawing your student:**

 Moving Other (please specify)

 Better education or environment

 Better sports, extra-curricular activities

 Programs (IB, AVID, GT, ELL, Sped)

**CSCA will release student records as requested by new school**

**Parent /Guardian Signature** **Student Relationship**

**Signature of School Official Title**

 **Please Turn Over**

**Please complete this brief survey upon withdrawal.**

 **YES MOSTLY NOT AT ALL UNSURE**

CSCA brings out the best in my [ ] [ ] [ ] [ ]

 child(ren):

Discipline problems are competently handled at CSCA:   [ ]         [ ]      [ ]  [ ]

My relationships with teachers are good: [ ] [ ] [ ] [ ]

Lines of communication to parents are clearly defined: [ ] [ ] [ ] [ ]

CSCA takes parents’ concerns seriously: [ ] [ ] [ ] [ ]