

# Request to Withdraw a Student

Auburn High School  
Auburn School District #408  
800 4<sup>th</sup> ST NE  
Auburn, WA 98002  
253-931-4876  
FAX 253-931-4705

Today's Date: \_\_\_\_\_

This is to authorize the withdrawal of the following student from Auburn High School

Name of Student: \_\_\_\_\_  
Last Name First Name MI

Birth date: \_\_\_\_\_ Grade: \_\_\_\_\_

Print Name of Parent / Guardian: \_\_\_\_\_

Current Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Last day of attendance will be: \_\_\_\_\_

**If you purchased a school annual Please make pick-up arrangements with the bookkeeper @ 253-931-4895)**

Reason for leaving Auburn High School: \_\_\_\_\_

\_\_\_\_\_

## Forwarding Information:

New High School: \_\_\_\_\_

School Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to student: Parent \_\_\_\_\_ Guardian \_\_\_\_\_ other \_\_\_\_\_