



## JEFFERSON COUNTY MIDDLE SCHOOL

3232 HWY 296 Stapleton, Ga 30823

Phone: 478-625-7764

Principal: Ms. Moya Pope, EdS.

Asst. Principals: Mr. Demetris Jenkins & Mrs. Rebecca Argoe, EdS.

### **Withdrawal Form**

Student Name \_\_\_\_\_

Grade \_\_\_\_\_ School Year \_\_\_\_\_ Birthdate \_\_\_\_\_

Old Address \_\_\_\_\_

New Address \_\_\_\_\_

New School \_\_\_\_\_

### **Reason for Withdrawal**

\_\_\_\_\_ Transfer to Another School

\_\_\_\_\_ No Show, Opening of School

\_\_\_\_\_ Home School

\_\_\_\_\_ Medical

\_\_\_\_\_ Court Removal

\_\_\_\_\_ Other

Library Books Returned (Y/N) \_\_\_\_\_

Title of Book \_\_\_\_\_ Cost \$ \_\_\_\_\_

School Fees Paid (Y/N) \_\_\_\_\_ Amount Owed \$ \_\_\_\_\_

Total Amount Owed \$ \_\_\_\_\_

I hereby authorize the withdrawal of my child(ren) from this school, and if transferring, request transfer of all academic and health records to the school listed above.

\_\_\_\_\_  
Parent/Guardian Signature      Date