

**Bristol Township School District  
Parent or Guardian Permission to Withdraw Form**

To Whom It May Concern:

I hereby acknowledge the my son/daughter \_\_\_\_\_  
**Student's Name** **Date of Birth**

is withdrawing from \_\_\_\_\_ for the following reason:  
**Name of School** **Date of Withdrawal**

**Moving**

**New Address and Telephone Number**


**New School**


**Other**

**Other**


*Signature of Parent or Guardian*

**Home Telephone Number**

**Work Telephone Number**

For Office Use

Student's Grade: \_\_\_\_\_

Identification was presented by parent/guardian:  Yes  No

Initials of Building Principal: \_\_\_\_\_

Signature of District Staff Member: \_\_\_\_\_