



WITHDRAWAL FORM

Student Name _____ ID# _____ Birth Date _____
(last) (first)

Date of Withdrawal: _____ Adviser _____

<i>Reasons for Withdrawal (check one)</i>	<i>Please Specify School Name & Location</i>
<input type="checkbox"/> Transfer to public school	
<input type="checkbox"/> Transfer to private school	
<input type="checkbox"/> Transfer out of country	
<input type="checkbox"/> Other (includes NT exchange students)	
<input type="checkbox"/> Student dropped out	

<i>New Contact Information for Parent(s)/Guardian(s) (if applicable)</i>	
<i>Address</i>	<i>Phone</i>

NOTE: If your student is currently engaged in or intends to participate in the **interscholastic athletic program** at New Trier please review the IHSA By-Laws as they apply to transfer and future athletic eligibility. Eligibility rules may impact students upon either transfer or re-entry. http://www.ihsa.org/documents/forms/2015-16/elgrules_lg_1516.pdf

Signatures:

Parent **OR** Adviser: _____ Date: _____

New Trier High School – Registrar Room215
 385 Winnetka Ave, Winnetka, IL 60093
 Ph: 847-784-2213 Fx: 847-784-2094
 Email: registrar@nthsh.net

(Office Use)

Exit Grades

IEP/504 _____ Sched _____
 Health _____ Setup _____
 Completed _____

Subject	Teacher	Exit Grade %
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____