



Official Notice of Pupil Withdrawal

Student Information																			
1. Student's Legal Last Name		2. Student's Legal First Name		3. Middle Name															
4. Sr/Jr/2 nd /3 rd		5. State Student ID		6. School Student ID															
7. Grade Level		8. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		9. Date of Birth (mm/dd/yyyy) / /															
10a. Primary Withdrawal Type Select the following that best describes why the student is withdrawing from school: <input type="checkbox"/> WD Demoted to the previous grade level during the current school year <input type="checkbox"/> WK Transferred to another calendar track within the same school <input type="checkbox"/> WP Promoted to the next grade level during the current school year <input type="checkbox"/> W1/S1 Transferred to another school in state <input type="checkbox"/> S99 Student transferred to another school within this district during summer <input type="checkbox"/> W21/S21 Transferred to attend school out of state <input type="checkbox"/> W2 Withdrawal due to chronic illness <input type="checkbox"/> W3 Expelled or long-term suspension <input type="checkbox"/> W4/S4 Attendance record showing 10 consecutive days of unexcused absence or status unknown <input type="checkbox"/> W5/S5 Dropout - no intention of completing necessary requirements for diploma <input type="checkbox"/> W6/S6 Age out (Older than 22 years of age) <input type="checkbox"/> W7/S7 Met all high school graduation requirements and awarded diploma <input type="checkbox"/> W15 Met all requirements for Grand Canyon Diploma and awarded diploma <input type="checkbox"/> W8/S8 Deceased <input type="checkbox"/> W9/S9 Transfer to be home taught <input type="checkbox"/> W10/S10 Transferred to a state detention or correctional facility <input type="checkbox"/> W11/S11 Withdrawal to obtain GED <input type="checkbox"/> W12/S12 Transfer to vocational or technical school which does not award HS diploma <input type="checkbox"/> W17 Received GCD; no longer enrolled full-time in AZ public university <input type="checkbox"/> W18 Received GCD; no longer enrolled full-time in AZ community college <input type="checkbox"/> W14 Met all requirements but not awarded GCD; continuing in high school <input type="checkbox"/> W19/S19 Eligible for GCD; student is no longer enrolled in a full-time CTE program <input type="checkbox"/> W20 Awarded GCD; post GCD participation unknown or ineligible			10b. Additional Withdrawal Reason (Optional) Select one of the following only if applicable: <input type="checkbox"/> WR1 School identified for Federal School Improvement ¹ <input type="checkbox"/> WR2 School identified as persistently dangerous ¹ <input type="checkbox"/> WR3 Individual Transfer Option (victim of a violent criminal offense) ¹ <input type="checkbox"/> WR4 Pregnancy / Biological Parent of a Child ² ¹ In accordance with No Child Left Behind and State Board of Education Policy ² In accordance with A.R.S. §15-1042(H) <i>Note for WR1 and WR2</i> <i>If a school does not have this designation, or if a student transfers to another school with the same designation, then this withdrawal reason is invalid</i>																
11a. Data in SMS Added by: (initials)		11b. Date Added (mm/dd/yyyy) / /		11c. Last Day of Attendance or Summer Withdrawal Date (mm/dd/yyyy) / /															
12. Parent/Guardian Signature		13. Student Signature (if applicable)		14. Date (mm/dd/yyyy) / /															
Information is certified correct according to School records																			
15. School		16. District /Charter# (CTD)		17. School # (S)															
18. Withdrawal Code (based on 10a.)			19. School Official Signature																
20. Date (mm/dd/yyyy) / /																			
Note: If parent or guardian is unable to sign this form, the school district should indicate the reason the signature was not obtainable.																			
21. SPEDⁱ Check all that apply. <table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> A</td> <td><input type="checkbox"/> HI</td> <td><input type="checkbox"/> MOID</td> <td><input type="checkbox"/> PSDⁱⁱ</td> <td><input type="checkbox"/> SLI</td> </tr> <tr> <td><input type="checkbox"/> DD</td> <td><input type="checkbox"/> MD/MDSSI</td> <td><input type="checkbox"/> OHI</td> <td><input type="checkbox"/> SID</td> <td><input type="checkbox"/> TBI</td> </tr> <tr> <td><input type="checkbox"/> ED/EDP</td> <td><input type="checkbox"/> MIID</td> <td><input type="checkbox"/> OI</td> <td><input type="checkbox"/> SLD</td> <td><input type="checkbox"/> VI</td> </tr> </table>					<input type="checkbox"/> A	<input type="checkbox"/> HI	<input type="checkbox"/> MOID	<input type="checkbox"/> PSD ⁱⁱ	<input type="checkbox"/> SLI	<input type="checkbox"/> DD	<input type="checkbox"/> MD/MDSSI	<input type="checkbox"/> OHI	<input type="checkbox"/> SID	<input type="checkbox"/> TBI	<input type="checkbox"/> ED/EDP	<input type="checkbox"/> MIID	<input type="checkbox"/> OI	<input type="checkbox"/> SLD	<input type="checkbox"/> VI
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22. ELL																			
AZELLA Information		ELL Program Information																	
Most Recent Assessment Date (mm/dd/yyyy) / /		Was student receiving ELL services in the current fiscal year? <input type="checkbox"/> Yes <input type="checkbox"/> No																	
Most Recent Overall Proficiency Level _____		If yes, program type (SEI type, ILLP, Bilingual): _____																	
		Was student withdrawn from ELL Service in the current fiscal year																	
		by parent request? <input type="checkbox"/> Yes <input type="checkbox"/> No																	
		due to IEP team decision? <input type="checkbox"/> Yes <input type="checkbox"/> No																	
If your district/charter administered an AZELLA test to this student, please attach a copy of the student's most recent AZELLA Student Report.																			