

OFFICIAL WITHDRAWAL REQUEST
Waverly Community School District #6
Waverly, IL

I, _____ (parent/guardian) for _____ officially
withdraw him/her from Waverly Jr./Sr. High School as of _____.

Please check the reason for withdrawal:

- Transferring Schools**
*Please list name of school _____
- Dropping Out of School**
- Home Schooling**
- GED**
- Other**

Parent/Guardian Signature

Date