



# LAKE LOCAL SCHOOL DISTRICT Withdrawal Request / Consent

Student's Name \_\_\_\_\_

Last day of Attendance \_\_\_\_\_

Student Grade \_\_\_\_\_

Student Date of Birth \_\_\_\_\_

I am withdrawing this student for the following reason(s):

- Moving out of Lake Local School District  
  Attending Private/Charter School  
  Home Schooled

Please list the name of the new school of attendance:

**HS Only:** Were you contacted by a school official for an exit interview?    Yes    No

NEW HOME Address (if applicable) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Preferred Email \_\_\_\_\_

**Last School Attended: (must check one)**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Lake Primary (Grades K-1)<br>13244 Cleveland Ave<br>Uniontown, OH 44685<br>330-877-4298/Fax: 330-699-3101<br>buckelkaren@lakelocal.org | <input type="checkbox"/> Lake Elementary (Grades 2-6)<br>225 Lincoln St<br>Hartville, OH 44632<br>330-877-4276/Fax: 330-877-4738 | <input type="checkbox"/> Lake Middle/High School (Grades 7-12)<br>709 Market Ave SW<br>Uniontown, OH 44685<br>330-877-4285/Fax: 330-877-0317 |
|---|--|--|

For State reporting requirements, Lake Local School District IRN #049866

I hereby grant permission for all confidential, medical, special education, psychological, education and/or information related to my child to be sent to:

Name of NEW School \_\_\_\_\_ Date \_\_\_\_\_

NEW School Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School PHONE \_\_\_\_\_ School FAX \_\_\_\_\_ School EMAIL \_\_\_\_\_

Date Signed \_\_\_\_\_

Parent Name (Please Print) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Relationship to Student \_\_\_\_\_