

Sayre Elementary  
23000 Valerie Street  
South Lyon, MI 48178

## Student Withdrawal Form

Student(s) Name \_\_\_\_\_  
\_\_\_\_\_

Grade(s) & Teacher(s) \_\_\_\_\_  
\_\_\_\_\_

Last Day in Class \_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Location  
of New School \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

School District \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date