

Fulton County Schools Home School Withdrawal Form

Student(s) Name:

Last	First	Middle	Birthdate
Last	First	Middle	Birthdate
Last	First	Middle	Birthdate
Last	First	Middle	Birthdate
Last	First	Middle	Birthdate

Withdrawal Date: _____

Reason for Withdrawal: (check one)

Enrolled to Public or Private Schools

If enrolled into public or private school please provide school name: _____

Moving/Moved out of state/county

If moved please provide new address: _____
Street City State Zip

Completion/GED

If completed, do you need a letter to take the GED test? _____

Student 16 or over

Please note students under 18 yrs cannot obtain a valid Georgia Driver's License if not attending public, private, or home school.

Other

Please state reason: _____

Parent/Guardian Name (print): _____ **Date:** _____

Parent/Guardian Signature: _____ **Date:** _____

Mail to: Fulton County Schools
Home Study Program
5270 Northfield Blvd
College Park, GA 30349