

MARICOPA COUNTY PRIVATE SCHOOL WITHDRAWAL FORM

STUDENT INFORMATION:

STUDENTS NAME (LAST, FIRST, MIDDLE)		// DATE OF BIRTH		
HOME ADDRESS	CITY STATE	ZIP	TELEPHONE	
PRIVATE SCHOOL INFORMATION:			For Office Use Only	
NAME OF PRIVATE SCHOOL WITHDRAWING FROM:				
ADDRESS: CITY:	ZIP CODE:			
(DATE) As of my child is no longer enrolled in the a	above listed private school for the followin	g reasons:		
Is enrolled in a public school another private school a charter school graduated moved to another county or state Other:	homeschool ESA			
ARIZONA STATE PRIVATE SCHOOL LAWS FOR WITHDRAWING YOUR STUDENT AS PRESCRIBED BY				
15-802 C: An affidavit of intent shall be filed within thirty days from the time the child begins to attend a private private school or the home school instruction is terminated and then resumed. <i>The person who has custody thirty days of the termination that the child is no longer being instructed at a private school or a home</i> the person who has custody of the child shall file another affidavit of intent with the county school superintent.	of the child shall notify the county school supering school. If the private school or home school instruct	ntendent within		

AUTHORIZATION:

PARENT/GUARDIAN NAME (PRINT)

PARENT/GUARDIAN NAME (SIGNATURE)

Please submit form to: Private School Services, 4041 N. Central Ave, Suite 1200 Phoenix, AZ 85012

4041 N. Central Avenue, Ste. 1200, Phoenix AZ 85012 • Phone 602-506-3866 • Fax 602-506-3753 • Private School Hotline 602-506-3144 rvsd 12/10/2018