

MARICOPA COUNTY PRIVATE SCHOOL WITHDRAWAL FORM

STUDENT INFORMATION:

				/
STUDENTS NAME (LAST, FIRST, MIDDLE)		DA		
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	n the above listed private school fo	or the following	ng reasons:	
Is enrolled in a public school another private school a charter so	chool homeschool	ESA [
ARIZONA STATE PRIVATE SCHOOL LAWS FOR WITHDRAWING YOUR STUDENT AS PRESCRIE	BED BY THE ARIZONA REVISED ST	TATUTES:		
15-802 C: An affidavit of intent shall be filed within thirty days from the time the child begins to attend private school or the home school instruction is terminated and then resumed. <i>The person who has c thirty days of the termination that the child is no longer being instructed at a private school or the person who has custody of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school support of the child shall file another affidavit of intent with the county school sch</i>	custody of the child shall notify the count a home school. If the private school or ho	ty school super.	intendent within	
AUTHORIZATION:				
PARENT/GUARDIAN NAME (PRINT)	PARENT/GUARDIAN N	NAME (SI	GNATURE)	_

Please submit form to: Private School Services, 4041 N. Central Ave, Suite 1100 Phoenix, AZ 85012