



411 North Front Street • Wilmington, North Carolina 28401-3993
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OFFICIAL SCHOOL WITHDRAWAL FORM

Name: _____ SSN: _____

Address: _____
Street City/ State /Zip Code

Date of Birth: _____ Age: _____

Telephone: _____

Last grade level completed: _____ Last School Attended: _____

School Address: _____
Street City/State /Zip Code

Last Date of School Attendance: _____ Date of Referral: _____

Reason for Withdrawal: _____

Signature of Superintendent/Designee

Date