

**Pitt County Schools
After-School Enrichment Program
OFFICIAL WITHDRAWAL FORM**

School: _____

Name of Student: _____

Date of Withdrawal: _____

Reason for Withdrawal: _____

This is to certify that my child is withdrawing from this After-School Enrichment Program at my request; all fees and other financial obligations have been met.

I understand that this terminates our agreement for my child to attend the After-School Enrichment Program. I understand that if I desire to re-enter the program this school year we must re-apply and pay the usual registration fee.

Signature of Parent/Guardian

Date

This is to certify that this withdrawal is being made with all financial obligations met.

Site Supervisor/Teacher

Date

Approved by After-School Coordinator

Date