

**Pitt County Schools  
Summer Enrichment Program  
OFFICIAL WITHDRAWAL FORM**

**School:** \_\_\_\_\_

**Name of Student:** \_\_\_\_\_

**Date of Withdrawal:** \_\_\_\_\_

\*\*Please note: We require a 2-wwk paid notice of withdrawal.  
Official last day is 2 weeks from withdrawal date.

**Reason for Withdrawal:** \_\_\_\_\_

This is to certify that my child is withdrawing from this Summer 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 Summer 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**