

LEAVING SCHOOL FORM FOR PARENTS

Please complete this form and return to the school office. If you are not sure of all these details, fill in this form as fully as you can before your child leaves.

NAME OF PUPIL DOB..... CLASS

My child will be leaving the school on (Date)

Because we are: a. Moving house
(Please Tick) b. Leaving the country
 c. Other - please give details

.....

NEW ADDRESS

Address Line Post Code

Or, if not known, the town or the country you are moving to

Name and address of new school if known

.....

Will you keep the same mobile phone numbers? Yes No

Please confirm your numbers: or list new numbers

a. Mother's Mobile/Telephone number

b. Father's Mobile/Telephone number

If leaving the country, please give us the name, address, and phone number of a friend or relative in the UK who is not moving. We will only contact them if we need information about your child's new school and we cannot contact you.

Name Telephone

Address Mobile

FULL NAME(S) of PARENT(S)/CARER(S) Please print names and sign

Mother Signature

Father Signature

THANK YOU FOR YOUR HELP

FOR SCHOOL USE ONLY - DATE FORM RETURNED TO SCHOOL OFFICE