

FCCCI WITHDRAWAL FROM PROGRAM (2-WEEK NOTICE)

Refer to the School Year Handbook for policies relating to Termination of Service.

CHILD: _____

DATE OF NOTICE: _____ LAST DATE OF ATTENDANCE: _____

SITE: BRADLEY BRUMFIELD C. HUNTER RITCHIE COLEMAN GRACE MILLER
 GREENVILLE H.M. PEARSON M. M. PIERCE MARY WALTER P.B. SMITH

Comments: _____

Parent Signature: _____ Date: _____

FCCCI USE:

Received at a site? Site: _____ Staff: _____ Date: _____

Received in Main Office: From parent Faxed E-Mailed Via Mail Date: _____

Provided written 2-week notice Did not provide proper notice

Parent confirmation copy: given to parent faxed e-mailed mailed sent via site _____

Processed by: _____ Date: _____