

## Odyssey Academy of Virtual Learning WITHDRAWAL FORM

STUDENT INFORMATION						
Student Name:		Grade:				
Birth Date		Student ID:				
Address:		Phone:				
City:		Zip:				
EDUCATIONAL SERVICES						
Receiving Special	Education Services?	□ Yes	0	No		
Please list all disabilities receiving services for:						
Date of Last IEP Meeting:						
Receiving English	□ Yes	0	No			
WITHDRAWAL PROCESS						
Reason for Withdrawal:						
Date of Withdrawal:						
Please indicate (with a check mark) which of the following you are choosing:  Return to local public school Enroll in a Private School						
<ul><li>Enroll</li></ul>	in a Homeschool Progran	(Please complete the Pl	-1206 H	omeschool Form)		
Have you enrolled	I with your new school?	□ Yes □	No	□ NA		
If yes, please list the approximate start date:						
If no, please list the anticipated enrollment date:						
Have you completed the PI-1206 Homeschool Form?						

FINAL STEPS					
	The following items MUST be completed prior to withdrawal.				
0	Submit Withdrawal Form to Heather Baird-Mueller at bairdmuellerh@ripon.k12.wi.us				
0	Complete the Exit Survey form at <a href="https://docs.google.com/forms/d/e/1FAlpQLSfGMAXXTjhTn1B-P6Ks36XFY5sVnH5qwqq-jXiKh2C6tYz3lg/viewform?usp=sf_link">https://docs.google.com/forms/d/e/1FAlpQLSfGMAXXTjhTn1B-P6Ks36XFY5sVnH5qwqq-jXiKh2C6tYz3lg/viewform?usp=sf_link</a>				
0	Return all non-consumable curriculum, equipment, and supplies purchased by Odyssey to Riverwood Educational Services (shipping provided). Consumable materials used with the "General Supply Budget" may be retained by the student. If a family has interest in retaining some of the materials, please contact our Odyssey office.				
	Note: The Odyssey office will issue a list of items to be returned.				
0	Return laptop computer and/or iPad to Riverwood Educational Services (shipping provided).				
	Note: If equipment is damaged, student fines or fees are assessed.				
By signing below, you acknowledge that you understand the terms and conditions of withdrawing from Odyssey Academy:					
(	(Parent/Guardian Signature) (Counselor Signature) If student is LEGAL AGE				

FOR OFFICE USE						
Date Withdrawal Received:		Date Records Request Received:				
Date RESI Contacted:		Date Enrollment Email Sent:				
Date Invoiced:		Date Enrollment End Dated:				
Supplies Returned:		Date Records Sent:				
Lessons Canceled:		Payment Received:				