

## **STUDENT EXIT FORM**

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Student Name:		Parent Name:		
Access Class:		Phone #:		
Access Class.		Forwarding		
Exit Date:		Address:		
REASON FOR LEAVING				
Transferring Schools	Name of School:			
	Contact Number:			
	Name of Employer:			
Employment	Contact Number:			
Cancellation	Confirmed By:			
Not Actively Attending	Confirmed By:			
SCHOOL RESOURCES	haala aada aada aada aada aada aada aada	latara eta) have bases re		ADMIN CHECK
All books (textbooks & library books) and resources (calcula		lators etc) have been re	turned to the library	ADMIN CHECK
Musical Instrument/s on loan has been returned				
FINANCE (If the students account is	in credit, please select an optic	on below) OUTS1	FANDING FEES:	\$
OPTION A (Credit siblings account)		ОРТІО	N B (transfer to bank	account)
Siblings Name:		BSB:		
Year Level:		Account #:		
		Account Name:		
Parent Signature:		Parent Signature:		
I understand that a refund will onl musical instruments (see above) I	have been returned undama	ged.		
I also understand that proof of 'Ea	rning or Learning' will be re	equired if my child is u	nder 16 years of a	ge.
Name:		Signature:		



## **STUDENT EXIT FORM**

OFFICE USE ONLY
DO NOT mark as left in One School as once student has left, details can no longer be entered.
Bank details entered onto One School
Preferred method of correspondence changed to POST
Check SRS Signed (AR Officer)
Printed list of outstanding resources from library (ATTACH)
Contact made with parent regarding outstanding resources
Student Out (Excel Spreadsheet) updated
Email sent out to all staff
Enrolment ceased on OneSchool
Removed from Student Management (Years 10, 11 & 12)
OTES