



# St. Patrick's Catholic High School

1001 The Rapids Parkway, Sarnia, ON N7S 6K2

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ST. CLAIR CATHOLIC  
DISTRICT SCHOOL BOARD  
*Lighting the Way - Progressing in Our Journey*

Chris Kehoe

Cynthia Blair

Erin Moffat-Sharpe

Frank Torti

## School Withdrawal Form

Student's Legal Surname: \_\_\_\_\_ OEN: \_\_\_\_\_ Grade: \_\_\_\_\_

Student's Legal First Name: \_\_\_\_\_

E-learning Student

Effective Date (mm/dd/yyyy): \_\_\_\_\_

*(must be the day immediately following the last day of attendance)*

### Transfer or Retirement Type

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> To School Within Board  | <input type="checkbox"/> To Home Schooling in Ontario | <input type="checkbox"/> To Federally Funded School in Ontario              |
| <input type="checkbox"/> To Publicly Funded School in Ontario<br><i>(Note: Should be used for E-learning students)</i> | <input type="checkbox"/> Deceased                     | <input type="checkbox"/> To other education/training/institution in Ontario |
| <input type="checkbox"/> Received OSSD   | <input type="checkbox"/> Destination Unknown          | <input type="checkbox"/> Retired. Not attending any school                  |
| <input type="checkbox"/> Received OSSC   | <input type="checkbox"/> Moved outside of Ontario     | <input type="radio"/> 15 Consecutive Days Absent                            |
| <input type="checkbox"/> Received COA  | <i>Specify:</i> _____                                 |   |
| <input type="checkbox"/> To Private School in Ontario  |   |   |

### Transfer Within Board

Demit to School: \_\_\_\_\_

### Transfer Outside Board, within Ontario

New School: \_\_\_\_\_

New School BSID #: \_\_\_\_\_

New School Address: \_\_\_\_\_

New Board: \_\_\_\_\_

**The Ontario Student Record will be forwarded to the new school upon receipt of an official request. This student has been provided with a copy of his or her latest report card and Ontario Student Transcript, if applicable.**

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Principal Signature: \_\_\_\_\_

Date: \_\_\_\_\_