



*East Lyme Public Schools
P.O. Box 176
East Lyme, CT 06333*

Jeffrey R. Newton, Superintendent
Amy Drowne, Assistant Superintendent

**HOME SCHOOL PUPIL WITHDRAWAL and/or
CHANGE OF INFORMATION FORM**

Pursuant to Connecticut state statutes, when a student reaches the age of 16 and discontinues home schooling, you are required to notify the East Lyme Public Schools Board of Education office. This form may also be used for address changes or to update information on your student's Affidavit of Intent. *If signed by the superintendent or assistant superintendent, students under 18 wishing to take their GED may present this form to the GED Examiner as our official notice of withdrawal.*

WITHDRAWN FROM HOME SCHOOL

YES _____ NO _____ DATE OF WITHDRAWAL _____
NAME OF CHILD (Print) _____ DATE OF BIRTH _____
ADDRESS _____ CITY _____ ZIPCODE _____
NAME OF PARENT OR GUARDIAN (Print) _____ TELEPHONE _____

CHANGE OF INFORMATION

OLD ADDRESS _____ CITY _____ ZIP _____
NEW PHYSICAL ADDRESS _____ CITY _____ ZIP _____
NEW MAILING ADDRESS _____ CITY _____ ZIP _____
(If different than physical address)
CURRENT PHONE NUMBER (____) _____
NAME OF SCHOOL DISTRICT WHERE YOU NOW RESIDE _____

SIGNATURE OF PARENT OR GUARDIAN _____ DATE SIGNED _____
SUPERINTENDENT _____ DATE SIGNED _____
ASSISTANT SUPERINTENDENT _____ DATE SIGNED _____