Student Withdrawal Form

I am hereby informing Highlands Preschool of the withdrawal of my child:

Student Name:______________________________________________________________

Teacher:_________________________ Class Days/Time:____________________________

Date of last day student will attend:__________________________________________

I understand that by completely filling out this form and promptly returning it to the preschool, I am officially withdrawing my child from Highlands Preschool.

Name (please print):___________________________________________________________

Signature:________________________________________Date:_______________________

Please return to the preschool in one of the following ways:
1) Drop in the outside locking mailbox
2) Drop in the inside locking collection box
3) Mail to: Highlands Preschool, Attn: Registrar,
    701 Monroe Avenue NE, Renton, WA 98056
4) Fax to: 206-984-4038
5) Email to: ekleiber@highlandspreschool.com

Exit Survey

So that we may continue to improve, and make informed decisions about, Highlands Preschool, please take a moment to let us know why you have withdrawn your child:

I am withdrawing my child because:

☐ Daycare/Work scheduling conflicts
☐ We’re moving
☐ Cost of tuition/monetary concerns
☐ Other:_____________________________________________________________________

For Office Use Only:

Date Received:___________________
Copy to: ☐ Registrar ☐ Teacher
Refund Due?_________________
Amount: $____________________
Date Mailed:___________________