

AL IMAN COLLEGE ABN 466 012 880 82 20 – 40 Rees Rd, Melton South VIC 3338 PO Box 2337, Melton South VIC 3338 Email: info@aliman.vic.edu.au Web: http://aliman.vic.edu.au/

Tel: 03 9743 4140

No

No

No

No

Student Withdrawal Form

How to complete this form?

- * This form must be completed by a parent/legal custodian or carer.
- * Please complete all sections of this form.
- * Please use ONLY black or blue ink.
- * Only one form per student.

Please tick the following:

Has the Library been informed?

Has the student's form teacher been informed?

Has the Accounts Department been informed?

Has the student's level co-ordinator been informed?

* All outstanding school fees must be paid in full prior to the withdrawal of student to ensure that the matter is not referred to a debt collector.

Section A - Student details	
Family name:	Given name:
Student's year level:	Student ID Number:
Date of last day of attendance: / / 20	
Parents contact details:	
Phone no. Email address: Prospective school (if applicable):	
Address:	
Section B - Reason for Withdrawal	
Please provide reason(s) for withdrawal:	
-	_
Section C - Signature of parent/legal custodian or carer:	
Parent(s):	
Father's signature and date	Mother's signature and date
Legal custodian or carer's signature and date	
Legal Custoulan Or Carer's signature and date	
Section D - for Office use only	

Yes

Yes

Yes

Yes