



# NORTH END Montessori School

## STUDENT WITHDRAWAL FORM

\_\_\_\_\_  
CHILD'S NAME (LAST, FIRST)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT/GUARDIAN NAME (PLEASE PRINT)



I hereby give 30-day notice to North End Montessori School that my child will be withdrawing from the program at North End Montessori on \_\_\_\_\_.  
Month/Day/Year

I understand that tuition is still due and will continue to make tuition payments to North End Montessori during the 30-day withdrawal period.

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

Received by:

\_\_\_\_\_  
NORTH END MONTESSORI SCHOOL STAFF

\_\_\_\_\_  
DATE