

Fill out a separate sheet for each student. Make additional copies as needed before writing on the form.

CLASS DROP FORM

Please Print

Family's Last Name _____

Student's Full Name _____

Home Phone _____ Cell Phone _____

E-mail Address _____

Is your entire family dropping out of Co-op? _____ Have you notified the teacher? _____

Note: Supply Fee & May Tuition Deposit are forfeited when a class is dropped.

Class Code	Class Name	Teacher	Drop Date mm/dd/yy

Family ID # _____

Student ID # _____

Date Processed in Ecoops:
Date Processed in Chalk:
Date Teacher Emailed:

Parent Signature & Date: _____