



# Notice of Intent to Disenroll a Student

Name of the person completing this form: \_\_\_\_\_

I/we will be disenrolling my/our child(ren) from Emerson School for the 2020-2021 school year, effective March 2, 2020. My child's last day will be June 11, 2020.

I/we understand that my responsibilities for a successful withdrawal may include, but are not limited to, withdrawing from student's classes and reconciling my bill with the Emerson School Business Office for payment or refund. All tuition and miscellaneous fees must be paid in full prior to the release of any student transcripts, report cards, and other student information.

Parents wishing to cancel the enrollment contract with Emerson School must submit this disenrollment form to the Head of School no later than 5:00pm on March 2, 2020. **Verbal notification is not considered due notice.**

## STUDENT INFORMATION

Student 1 Full Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Student 2 Full Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Student 3 Full Name: \_\_\_\_\_ Current Grade: \_\_\_\_\_

## PARENT INFORMATION

### Parent/Guardian 1

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

The student lives at this address (please specify):  All the time  Part of the time

### Parent/Guardian 2

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

The student lives at this address (please specify):  All the time  Part of the time

## Return Correspondence

Send return correspondence to:  Parent/Guardian 1  Parent/Guardian 2



**What school will student(s) attend next year?** \_\_\_\_\_

**What is the PRIMARY reason for your departure?** *(check one)*

- Athletics
- Change in finances
- Convenience of school location
- Cost/Value
- Curriculum
- Easier application/admission to high school
- Relocation
- School environment
- School leadership
- Siblings at another school
- Teachers
- Other/additional comments

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**What other factors influenced your decision to depart?** *(check all that apply)*

- Athletics
- Change in finances
- Convenience of school location
- Cost/Value
- Curriculum
- Easier application/admission to high school
- Relocation
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**How likely would you be to recommend Emerson School to another family?**

Very unlikely			Unlikely				Likely			Very likely
1	2	3	4	5	6	7	8	9	10	



**How did Emerson School live up to your expectations in the following areas?**

	Did not meet expectations	Met expectations	Exceeded Expectations
After School Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class Size	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curriculum/Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diversity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enrichment classes ( <i>art, music, physical education, technology, world languages, middle school electives</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mission/Philosophy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School resources ( <i>technology, facility, learning tools, etc.</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School culture/environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Is there any other feedback about your child’s experience at Emerson you would like to share?**

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**EXIT INTERVIEW**

- I/We request an exit interview with the Head of School for the purpose of expressing our opinions and comments about the School and educational program.
- I/We decline an exit interview with the Head of School.
- I/We would welcome a call from the Head of School to give feedback about this disenrollment decision.

**CONFIRMATION**

I/we acknowledge this form is signed by all parties who have signed the Application for Enrollment form.

Signature Parent/Guardian 1: \_\_\_\_\_ Date: \_\_\_\_\_

Signature Parent/Guardian 2: \_\_\_\_\_ Date: \_\_\_\_\_