

 $\hfill\square$ Behavioural exclusion

 $\hfill\Box$ Carer responsibilities

Withdrawal Form

					QUEEN	SLAND
Support Organis	sation					
Surname	Given Name	USI	Last date of attendance		Reason for Withdrawal	
			/ /20		☐ Further training- Part time ☐ Further training- Full time ☐ Y J order terminated ☐ Incarceration ☐ Behavioural exclusion ☐ Carer responsibilities	
			/ /20	□ Loss of contact □ Relocated □ Poor attendance □ Disengagement □ Employment □ Return to school	☐ Further training- Part time ☐ Further training- Full time ☐ Y J order terminated ☐ Incarceration ☐ Behavioural exclusion ☐ Carer responsibilities	
				□ Loss of contact□ Relocated□ Poor attendance□ Disengagement	☐ Further training- Part time☐ Further training- Full time☐ Y J order terminated☐ Incarceration	

□ Employment

☐ Return to school

/20

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			/ /20	□ Loss of contact □ Relocated □ Poor attendance □ Disengagement □ Employment □ Return to school Name of School: Other.	 □ Further training- Part time □ Further training- Full time □ Y J order terminated □ Incarceration □ Behavioural exclusion □ Carer responsibilities
			/ /20	□ Loss of contact □ Relocated □ Poor attendance □ Disengagement □ Employment □ Return to school Name of School:	 ☐ Further training- Part time ☐ Further training- Full time ☐ Y J order terminated ☐ Incarceration ☐ Behavioural exclusion ☐ Carer responsibilities

		Other

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		Name of School:
		Other