

## Withdrawal Form

Support Organisation				
Surname	Given Name	USI	Last date of attendance	Reason for Withdrawal
			/ /20	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Loss of contact  <input type="checkbox"/> Relocated  <input type="checkbox"/> Poor attendance  <input type="checkbox"/> Disengagement  <input type="checkbox"/> Employment  <input type="checkbox"/> Return to school                 </div> <div style="width: 45%;"> <input type="checkbox"/> Further training- Part time  <input type="checkbox"/> Further training- Full time  <input type="checkbox"/> Y J order terminated  <input type="checkbox"/> Incarceration  <input type="checkbox"/> Behavioural exclusion  <input type="checkbox"/> Carer responsibilities                 </div> </div> <p>Name of School: .....</p> <p>Other.....</p>
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