

**NOTIFICATION OF REMOVING A STUDENT FROM ROLL**

**Please complete this form as soon as you become aware that your child will be leaving St Laurence (other than at the end of their Year 11 or Year 13 education)**

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| --- | --- | --- | --- | --- | --- |
| **Full Name of Student** |  | | | **DOB** |  |
| **Year Group & House** |  | | | | |
| **Current Address** |  | | | | |
| **New address**  **(if appropriate)** |  | | | | |
| **Parent/Carer names and contact numbers** | **Contact 1** | | **Contact 2** | | |
| **Who does the student usually reside with?** |  | | | | |
| **Date leaving St Laurence School** |  | **Reason** | |  | |
| **Name of receiving Local Authority** |  | **Name of receiving school** | |  | |
| **Any further information** |  | | | | |
| **Parent/Carer Signature** |  | | | | |
| **Dated** |  | | | | |