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|  | Pupil Leaving FormThis form is to be completed upon notification of a pupil leaving our school, and should be **returned to the Learning Mentor as soon as possible**. |

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| Pupil Name: | Class: |

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| --- | --- |
| Date of Leaving: | Reason for Leaving: |

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| Forwarding Address / Destination:Contact Telephone Numbers: |

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| Name of New School: |

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| Name of Person Providing Information:Relationship to Child: |

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| Staff Member Completing Form: Date:  |

