



# SCHOOL WITHDRAWAL FORM

Please return the completed form to the Reception three months before your child's last day of school.

I (Parent/Guardian) : \_\_\_\_\_

Hereby withdraw

The student's name : \_\_\_\_\_

Student's class : \_\_\_\_\_

Student's CPR #/DOB : \_\_\_\_\_ from

Østerbro International School:

SFO/ASCP:

The last school day will be on: \_\_\_\_\_ The last SFO/ASCP day will be on: \_\_\_\_\_

Reason(s) for withdrawal:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Leaving Certificate needed  yes  no

Name & Address of New School: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
(Leaving certificate will be sent to this Email)

Date: \_\_\_\_\_ Parent Signature: \_\_\_\_\_:

To be filled out by the school office:

Withdrawal form for: \_\_\_\_\_ Grade: \_\_\_\_\_ Last day: \_\_\_\_\_

Form received: \_\_\_\_\_ Signed: \_\_\_\_\_



The school deposit will be transferred as soon as we have all required signatures:

<b>BOOKS FROM THE LIBRARY</b>	
..... (Signature Librarian)	Date.....
<b>SCHOOLBOOKS</b>	
..... (Signature Class Teacher)	Date.....
<b>ACCESS TAG</b>	
..... (Signature Administration/Reception)	Date.....
<b>IPAD/MACBOOK (only for MYP and DP students)</b>	
..... Signature Principal)	Date.....
<b>School Fees paid?</b>	
..... (Signature Accountant)	Date.....

**Deposit can be transferred to following Bank Account:**

My company is paying \_\_\_\_\_ (company name) \_\_\_\_\_ (company mail address)

**Account number to send refund of deposit in Denmark**

Reg. Nr: \_\_\_\_\_ Account Number: \_\_\_\_\_

**For other countries**

Bank name: \_\_\_\_\_ Bank Address: \_\_\_\_\_

BIC: \_\_\_\_\_ IBAN: \_\_\_\_\_