DOMINION ACADEMY OF DAYTON

A Miami Valley Classical Christian School

School Withdrawal Form

Date_____

Name of Student _____

Date Withdrawn _____

Reason for Withdrawing _____

_____

_____

_____

Administrator's Signature _____

Parent's Signature _____

Withdrawal Policy

Parents wishing to withdraw students from school must complete this withdrawal form. **Students will be considered still enrolled in the school until the withdrawal form is filled out properly and turned into the office**. Unless withdrawal is due to an emergency or to special circumstances, the following pro-rated refund schedule:

1. Withdrawal by the end of week one – 100% refund
2. Withdrawal by the end of week two – 80% refund
3. Withdrawal by the end of week three – 60% refund
4. Withdrawal by the end of week four – 40% refund
5. Withdrawal by the end of week five – 20% refund
6. Students withdrawing from a course after the fifth week of the **semester** will be charged full tuition for the remainder of that **semester** for each course.

Students withdrawing from academic classes after the end of week five of the semester, will receive **Withdraw/Passing (W/P)** or **Withdraw/Failing (W/F)** on their transcripts.

Office Use Only:
Grade Card/Transcript:
_____ Withdrawal/Passing
_____ Withdrawal/Failing
_____ Expunged

Office Use Only:
- ☐ Tuition adjusted-invoice revised
- ☐ FACTS notified/changed/canceled
- ☐ Class enrollment changed