



NORTH CHICAGO COMMUNITY UNIT SCHOOL DISTRICT #187

Office of District Registrar

1717 Seventeenth Street North Chicago, Illinois 60064

Phone: 847-578-7400 Ext. 7249 Fax: 847-689-7478

REQUEST FOR WITHDRAWAL FORM

The Illinois School Code (105 ILCS 5/26-1 et seq.) states that children between the ages of 7 and 17 must attend public school; however, an exception is made for “....any child attending a private or parochial school where children are taught the branches of education taught to children of corresponding age and grade in the public schools, and where the instruction of the child in the branches of education is in the English language.”

Student’s Name (print): _____

Date of Birth: ____/____/____ Grade Level: _____

(Indicate the reason for withdrawal below):

MOVING - New Address: _____

New School Name: _____

New School City, State, Zip: _____, _____

OTHER REASON (please state): _____

New School Name: _____

New School City, State, Zip: _____, _____

DATE OF WITHDRAWAL: ____/____/____

**Will student remain
in school
this day, all day?**

YES or NO

Parent/Guardian Name (print): _____

Signature: _____ Today’s Date: ____/____/____

Phone Number: (_____) _____ - _____

**UPON SUBMITTING THIS REQUEST, YOUR STUDENT IS NO LONGER A STUDENT AT NORTH CHICAGO COMMUNITY HIGH SCHOOL. ALL CLASSES WILL BE DROPPED AND YOU WILL BE REQUIRED TO RE-ENROLL TO ATTEND. THIS INCLUDES PAYMENT OF FEES, PROOF OF RESIDENCY, AND COMPLETING ALL NECESSARY ENROLLMENT FORMS.*

COUNSELOR INFORMATION

(A-GA) BIHN

(GE-O) BUCHBERGER

(P-Z) SALINAS