

# Kau Yan School (primary section)

## Application for Withdrawal of Study

### IMPORTANT NOTES

The notice period for application for withdrawal shall not be less than two months, and one-month tuition fees shall be paid. The school starts counting from the date of receiving the written notification ◦

### Section I : Student Particulars

Student Name : \_\_\_\_\_

Class: \_\_\_\_\_ Class No: \_\_\_\_\_

Contact No : \_\_\_\_\_ Email Address : \_\_\_\_\_

### Section II : Reason for Withdrawal

I hereby confirm you of my decision to discontinue my study , my last school date is on \_\_\_/\_\_\_/\_\_\_ due to the following reason: (Please choose the main reason for withdrawal of study  only One box)

Continue study in another School

(The name of the school must be indicated in order to be submitted to the EDB) \_\_\_\_\_

Financial reason       Family Reason(s)       Health reason(s)       Mainland Study

Emigration (please specify) \_\_\_\_\_  Oversea Study (please specify) \_\_\_\_\_

Others (please specify) \_\_\_\_\_

### Section III : Declaration

**I declare that the information given in this form is true and correct. I fully understand and agree with the "IMPORTANT NOTES" of this form.**

Name of Parent/Guardian \_\_\_\_\_ Signature of Parent / Guardian : \_\_\_\_\_ Date : \_\_\_\_\_

----- This column is filled in by the school -----

### Section IV : Procedure

Step	Administrative Office	Matter for Clearance	Remarks
1	Approval by the Principal	<input type="checkbox"/> Received the notice of withdrawal, grant approval for withdrawal of study since the # First/Second semester of 20___/___ Principal Signature : _____ Date : _____	
2	Account	<input type="checkbox"/> Student has paid off the tuition fees on _____(Date).	
3.	Learning Centre	<input type="checkbox"/> Student has returned and refund all books overdue fines (if any) on _____(Date)	
4	Registry	<input type="checkbox"/> The school has contacted related teachers on _____(Date) <input type="checkbox"/> The school has renewed the school student record on _____(Date)	
5	Others		
6	EC approval	Name : _____ Signature : _____ Date : _____	