STUDENT DEPARTING FORM

Students Name: 

Year Level: 

Last Day attendance:

<table>
<thead>
<tr>
<th>Destination: Qld / Interstate / Overseas</th>
<th>Destination School:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for Leaving:</td>
<td></td>
</tr>
<tr>
<td>PF – Personal/family reasons (eg. Work, moving, illness etc).</td>
<td>DS – Dissatisfaction with one or more aspects of this school.</td>
</tr>
<tr>
<td>CO – Completed studies to the highest year level.</td>
<td>CE – Cancellation of enrolment/exclusion.</td>
</tr>
<tr>
<td>UN – Unknown Reason.</td>
<td></td>
</tr>
</tbody>
</table>

FORWARDING ADDRESS IF KNOWN:-

ADDITIONAL INFORMATION:- Boyne Island State School has a proud tradition of providing quality learning experiences for all our students. We learn from our clients and your feedback can help us plan for the future.

Library – Outstanding Books
Please pass on to Librarian

Guidance File held
Please pass on to Class Teacher

CLASSROOM TEACHERS ONLY

Net files and other information handed in to the office.

OFFICE USE ONLY

Profiled through EQ
If yes, disability area:

School Disciplinary Absences in past 12 months

Medical Conditions (severe)
If yes, brief details

Legal and protection matters
If yes, brief details

International Student
If yes, brief details

Other relevant information

Prepayment Option – Refund