

EUROPEAN SCHOOL OF ALICANTE EXECUTIVE SECRETARIAT



Families wishing to withdraw their child/ren from the European School of Alicante, shall submit this form, duly filled in and signed by the legal representatives.

Parents may handle in this form to the Executive Assistant (Ms. Font) or submit it by e-mail beatriz.font@eursc.eu

One form per family	
Name and First name of the child	Current class attended (Please indicate cycle, class level and section; e.g: S1 ES, P2 EN)

(Not necessary for pupils of secondary 7th)

Mr _____Father/Legal representative

Mrs

of the above pupil(s), REQUEST TO BE WITHDRAWN from the European School of Alicante from the

_____Mother/Legal representative

/ /20 .

Signed in Alicante on _____, ____ 20____

Father's or legal representative's signature Mother's or legal representative's signature

This form must be signed by both parents/legal representatives