

Vision Charter Academy

Withdrawal Process

To complete the withdrawal process the learner/parent will need to do the following.

- Step 1 Complete a VCA Withdrawal form and submit form to VCA Family Liaison.
- Step 2 Complete Educational Resource Returned form and submit (both the form and the resources) to Campus Coordinator.*
- Step 3 Return all library check-outs to Campus Coordinator.*
- Step 4 Complete hourly log entries to be verified by assigned HQC/Teacher.
- Step 5 Complete final entries in the learners FRED account, including targets and grade/credit information for verification by the assigned HQC/Teacher.**

**VCA will invoice you for any educational resources or library check-outs that are damaged due to misuse or not returned. **Please note that any parent guided coursework that is not provided to the HQC for verification of final grades will be documented as an F and 0.0 credit on your learner's official transcript.*

Once all steps have been completed the learner will be exited from both PowerSchool and F.R.E.D. and official records transferred to any school or program that submits an official request.

Vision Charter Academy
Withdrawal Form

Full Name of learner: _____ Current Grade Level: _____

Mailing Address: _____

City: _____ State: _____ Zip code: _____

Name of parent/guardian: _____

Telephone Number: (_____) _____

Email Address: _____

REASON FOR WITHDRAWAL (EXIT CODE):

*Transfer in district (11)

Transfer to Home School (16)

*Transfer in state (13)

Drop out/Discontinuing Schooling (40)

*Transfer out of state/country (14)

learner must be at least 17 yrs. old to drop

*Transferring to a private school (15)

Expelled (50)

Graduation (90)

***Please provide the following information if the student is transferring to another school or program.**

Name of New School/Program: _____

Street Address: _____

City, State and Zip code: _____

Country (if other than US): _____

Anticipated last date of attendance at VCA school:

First scheduled date of attendance in new educational program:

Learner's Signature: _____

Date: _____

Parent/Guardian's Signature: _____

Date: _____

VCA Staff Signature: _____

Date: _____

****IMPORTANT****

VCA will invoice you for any educational resources or library check-outs that are damaged due to misuse or not returned. Please note that any parent guided coursework that is not provided to the HQC for verification of final grades will be documented as an F and 0.0 credit on your learner's official transcript.

FAMILY SATISFACTION

Please express your overall level of satisfaction with the VCA.

____ Excellent ____ Good ____ Fair ____ Poor

How did the VCA help your learner? Check all that apply.

Increase self-esteem	<input type="checkbox"/>	Increase skill levels	<input type="checkbox"/>	Making choices	<input type="checkbox"/>
Increase knowledge	<input type="checkbox"/>	Freedom of schedule	<input type="checkbox"/>	Other	<input type="checkbox"/>

If you checked other, please share with us how participating in this school has benefited your learner:

Additional Comments:
