

## ELEMENTARY SCHOOL WITHIN COUNTY WITHDRAWAL CHECKLIST

(Appendix 23)

Receiving School:	School #:
Student Name:	Grade:
Student I.D. #:	
	Cumulative Folder
	Health Folder (including Medical Alert)
	Confidential Folder
	ESE Teacher's Work Folder/I.E.P. Disk
	Progress Monitoring Plan
	Progress Monitoring Folder including AIP, Assessment Data, and others
	Progress Report with Envelope
	Title I
	ELL (ESOL) File
	Completed Withdrawal Form and Checklist
Signature	 Date
School sending records	

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Distribution:

Sending School

Student's Cumulative Folder