If you plan to withdraw your child/ren from the school, please complete, tear off and submit the form below to the reception office. The date of receipt will be noted.

Refund of the deposit is dependent upon the parents giving written notice by Term 4 of this academic year, that their child/ren may be leaving in the following academic year, along with all outstanding accounts being cleared and school resources such as textbooks being returned. KISC understands that giving exact dates one year in advance is difficult, so please complete the form as best you can and keep us up to date on any changes via email to [**admin@kisc.edu.np**](mailto:admin@kisc.edu.np) or by letter.

Having exact dates closer to the time allows the school to plan to appropriately farewell your child/ren and prepare leaving documents.

If you wish to **withdraw** your child from the school, please complete this form and return it to the reception office

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student name:** | |  | | | | **Year:** | |  |
| **Student name:** | |  | | | | **Year:** | |  |
| **Student name:** | |  | | | | **Year:** | |  |
| **Date of final day of school:** | | | |  | | | | |
| **Reason for withdrawal (optional):** | | |  | | | | | |
|  | | | | | | | | |
| I confirm that these are my current intension to withdraw my child/ren from KISC. If my plans or dates changes, I will inform the school by email to [**admin@kisc.edu.np**](mailto:admin@kisc.edu.np) or letter. | | | | | | | | |
|  | | | | | | | | |
| Parents name: |  | | | | Signature: | |  | |

………………………………………………... For office use only………………………………………….…….......

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date received: |  | Eligible for refundable deposit: |  | Signed |  |