



# DUDLEY HOMESCHOOL CONSORTIUM

P.O. BOX 634  
MOORE, SOUTH CAROLINA 29369  
(864)280-9663

## REQUEST FOR WITHDRAWAL

To Whom It May Concern:

I, \_\_\_\_\_, legal parent/guardian of \_\_\_\_\_ am requesting to withdraw my child from their current school to be homeschooled under South Carolina Option Three. It is requested that all records and pertinent information in reference to my child be sent to Dudley Homeschool Consortium, a South Carolina homeschool association. Please complete the information below and email to [homeschool@dheg.org](mailto:homeschool@dheg.org).

Many Thanks,

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

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*INFORMATION BELOW THIS LINE TO BE FILLED OUT BY SCHOOL OFFICIAL*  
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### Student & School Information

Student Name		
Student ID	Grade	Permanent Address
Current School	School Address	

### Attendance Record

Number of Days Absent	
Number of Days Present	

### Grade Record

Course	Grade (%)
English/Language Arts	
Mathematics	
Science	
Social Studies/Historical Studies	

School Official Completing Form: \_\_\_\_\_ Date: \_\_\_\_\_