Winston-Dillard School District 116

Code: JHFDA-AR(2)

Adopted: 7/10/02 Readopted: 5/25/11

Orig. Code(s): JHFDA-AR(2)

Notice of Withdrawal

Student Name (Print Last, First, Middle)					
Student Address		City	State	Zip Code	
		- 2		£	
Date of Birth (MM/DD/YYYY)	Oregon Driver License/ID Number (If Known)		Last Day of Attendance (MM/DD/YYYY)		
I hereby notify the Department of Transportation to suspend the driving privileges of the above named student because the student is considered to have withdrawn from school per ORS 339.257 (2). The policy adopted under ORS 339.257 meets all requirements of the law including: The number of days of unexcused absence; the age of the student; and, a provision allowing the student to appeal this decision.					
Name of District or Private School			Telephone Number		
			()		
Address		City	State	Zip Code	
Title:					
□ District Superintendent □ Board Member/Superintendent □ Authorized Representative of Private School					
Name of Authorized Person (Please Print)					
Signature			Date		
X					

735-7186 (-00)

White copy to DMV, Yellow copy for your records

STK# 300161