

Liberty Creek High School



Student Information

Student's Legal Name: _____

Date of Birth: _____

Grade for 24-25 School Year: _____

Does your student have a 504 or IEP? YES or NO

If yes, which one? 504 or IEP

Former School Information

School Name: _____

School Address: _____

School Phone Number: _____ School Fax Number: _____

Name of School's Registrar: _____

I understand that I must return all books and technology issued by my former school and pay any outstanding balances when I withdrawal. I understand that Liberty Creek High School may not be able to obtain my student's records if I owe outstanding balances, textbooks, and/or technology to my former school.

Parent Signature: _____