



EXCELLENCE
TODAY
FOR TOMORROW

Rose Tree Media School District
308 North Olive Street
Media, Pennsylvania 19063-2493
Telephone 610.627.6000
www.rtmtd.org

ENTRY/WITHDRAWAL & TRANSFER FORM

(Please Type)

PUPIL'S NAME _____
Last First Middle Birthdate Grade Level

Parent/Guardian _____ RTM Address _____ Telephone No. _____

School Assigned/Attended (Address if a Withdrawal from RTM) _____ Teacher's Name _____

ACTION CODE _____ Date of Entry or Withdrawal _____

WITHDRAWAL: Indicate reason below

Moved out of District – Please check one: FAMILY PUPIL ONLY
 State name and address of new school if known _____

Transferred within RTM _____
Name of School/Teacher Grade Date

Change of Address and Attendance Area within RTM (State new address of pupil) _____

Other (Specify) _____

Parent Signature _____

PLEASE TYPE SLIP AND DISTRIBUTE AS FOLLOWS:

Please print out and send to the student's school. The school will distribute to proper people.

OFFICIAL REQUEST FOR RECORDS

I hereby certify that _____ entered the _____

School in _____ School District on _____ day of _____ year _____

The school address is:

Signature of School Official

PLEASE FORWARD: Health, dental, educational, psychological records, test scores, IEP's, and any other available school records.