



Course Withdrawal Form

Section A

Required!! To be completed *IN FULL* by parent (please print or type clearly)

Student Name: Enrolment Number:

Parent Name: Current Grade/Section:

Student Date of Birth:

I wish to withdraw my child from the School: Temporarily Permanently

Last Day of School: _____

Parent Signature _____ Date: _____

Please complete and email to admissions@kindlekids.sg. The withdrawal is not official until you receive confirmation from the Kindle Kids International School. Confirmation &/or Refund if any shall be processed within 7 working days from the date the duly signed withdrawal form is received by us. Please contact us if you do not receive a confirmation. You will still be responsible for tuition and academic progress until you receive this confirmation.

Section B

Reason for Withdrawal (please check as appropriate):

- Transferring to another institution
- Personal Reasons
- Medical Reasons
- Employment
- Academic Failure
- Financial Reasons
- Other Reasons

Other Reasons (please list any reasons below):

Acknowledged by:

Name/Signature/ Student Admissions Support

Date Acknowledged

Approved by:

Head of School / School Coordinator

Date Approved