

## **Gull Lake Virtual Partnership Exit Form**

Student Name:	
Current School Year : Current Grade L	evel:
Please choose and complete <u>one</u> of the following regarding your student's withdrawal from Gull Lake Virtual Partnership:	
☐ My student is returning to our home school program as of (date).	
☐ My student is graduating/graduated from our homeschool program on (date)	
☐ My student is going to another school:(please note school)	
Parent Name:	
Parent Signature:	
Date:	
Send completed form to one of the following staff members:	
Kelly Morcombe, Administration Bldg	Anita Talmage, Bedford Building
kmorcombe@gulllakecs.org	atalmage@gulllakecs.org
10100 E D Avenue, Richland MI 49083	315 Hutchinson, Battle Creek MI 49017