

**Charlotte County Public Schools**  
**Exit Interview Student Survey**  
**(Appendix 29)**

School Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Student Name: \_\_\_\_\_ Student DOB: \_\_\_\_\_

Date: \_\_\_\_\_

**Directions: Please review the 2 questions below & check all that apply to you.**

1. Which of the following best describes your reasons for terminating school enrollment?

- |  |  |
|--|--|
| <input type="checkbox"/> Classes were not interesting/bored          | <input type="checkbox"/> Employment/Have to work full-time   |
| <input type="checkbox"/> Missed too many days and could not catch up | <input type="checkbox"/> Friends dropped out                 |
| <input type="checkbox"/> Did not like school                         | <input type="checkbox"/> Failed State testing requirements   |
| <input type="checkbox"/> Student-Teacher conflict                    | <input type="checkbox"/> Intimidated/Threatened/Bullied      |
| <input type="checkbox"/> Illness (physical/mental)                   | <input type="checkbox"/> Homeless                            |
| <input type="checkbox"/> Became a parent                             | <input type="checkbox"/> Family problems/needed to stay home |
| <input type="checkbox"/> Felt like nobody cared                      | <input type="checkbox"/> Language difficulty                 |
| <input type="checkbox"/> Felt like I did not belong                  | <input type="checkbox"/> Suspended from school too often     |
| <input type="checkbox"/> Failing classes/could not do the work       |  |

2. What actions did school personnel take to keep you enrolled in school?

- |   |   |
|---|---|
| <input type="checkbox"/> Provided counseling  | <input type="checkbox"/> Conducted home visits  |
| <input type="checkbox"/> Scheduled a conference with parent(s), guardian(s), and school staff                           | <input type="checkbox"/> Implemented intervention contracts (e.g. attendance or behavior)   |
| <input type="checkbox"/> Discussed and offered options for tutoring   | <input type="checkbox"/> Changed or revised course schedule   |
| <input type="checkbox"/> Discussed the consequences of dropping out   | <input type="checkbox"/> Discussed possibility of a mentor  |
| <input type="checkbox"/> Discussed and offered participation in a credit recovery course/program                        | <input type="checkbox"/> Discussed and offered access to alternative education or teenage parent programs                           |
| <input type="checkbox"/> Discussed and offered alternative options for graduation (e.g. diploma options or GED testing) | <input type="checkbox"/> Discussed and offered different educational options (e.g. home school, virtual school, hospital homebound) |
| <input type="checkbox"/> Referred to agencies/programs to address problems interfering with school success              |   |

## Declaration of Intent to Terminate School Enrollment

**Please sign below to certify each of the following statements.**

I am at least 16 years of age and it is my intent to terminate my school enrollment. I received counseling from school personnel which addressed the following:

- The importance of staying in school to receive my high school diploma.
- That dropping out will likely reduce my potential earnings and negatively affect my career options.
- Termination of school enrollment will result in the revocation/denial of driving privileges until age 18.
- Dropping out eliminates my chances of going into the military.
- GED waivers are required if under 18 years of age and are provided by the Academy Principal.
- SSI benefits with LearnFare program could be terminated.
- For Bright Futures eligibility, GED students must complete coursework & GPA requirements before taking GED exam.
- The alternative program options available to me.
- Possible actions the school could take to keep me in school.
- My reasons for leaving school prior to graduation.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(May be completed by phone interview)

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(if student is under 18 years of age) (May be completed by phone interview)

School Personnel Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR OFFICE USE ONLY:

DOP Code Assigned: \_\_\_\_\_

CODE	DEFINITION
DNE	Any KG-12 student who was expected to attend a school but did not enter.
W05	Any student age 16 or older who leaves school voluntarily with no intention of returning.
W13	Any KG-12 student withdrawn from school due to court action (this code does not apply to DJJ placements.)
W15	Any KG-12 student who is withdrawn from school due to non-attendance after all procedures have been followed.
W18	Any KG-12 student who withdraws from school due to medical reasons and is unable to receive educational services, (i.e., hospital/homebound)
W21	Any KG-12 student who is withdrawn from school due to being expelled with no educational services.
W22	Any KG-12 student whose whereabouts is unknown and cannot be located.
W23	Any KG-12 student who withdraws from school for any reason other than W01-W22 or W24-W27.