

**Documentation for Change in Schools
Without Student Records Request**

(All attempts to receive verification in writing have failed)

Student Name: _____ DOB: _____ Grade: _____

Last School Attended: _____

Approved Verification Methods (check all that apply):

Spoke with the school or district where student is currently enrolled and verified their attendance.

Name of School/District/State: _____
Phone Number: _____
Name of Staff who verified enrollment: _____

Spoke with a parent or guardian about a move to another county, state or country.

Name of Parent/Guardian: _____
Moving to: _____

Spoke with a parent or guardian who indicated student is enrolled in an adult GED program.

Name of Parent/Guardian: _____

Spoke with a parent or guardian who indicated student is enrolled at a private school.

Name of Parent/Guardian: _____

Spoke with other agency staff to verify students' location. (Other agencies may include: Department of Children and Families, Camelot or other protective service agency, Lutheran Services FL, Law Enforcement, or Department of Juvenile Justice)

Name of Agency: _____
Name & Title of Staff: _____
Location of Student: _____

Spoke with Foreign Exchange Agency Contacts to verify a change of school placement.

Name of Agency: _____
Name of Contact: _____
Location of Student: _____

Found student record in: Dropout Match Report or F71339 DOE Survey 6 Report
 Student Locator Report

Name of School/District: _____

Name of Staff Completing This Verification Form **Date**

Recommended Withdrawal Code: W _____ **As of Date:** _____

Signature of Certifying Principal or Administrative Designee **Date**