MYRON B. THOMPSON ACADEMY

1040 Richards St., Ste. 220 Honolulu, HI 96813 Phone: (808) 441-8000 Fax: (808) 683-7062 www.ethompson.org

Secondary Intent to Exit Form

Instructions: To initiate the Withdrawal process, Parent/Guardian must complete this form and submit a signed copy to the Registrar's Office via scanned email, fax, hand deliver (must schedule appt 24 hrs in advance), or regular mail.

Dear R	egistraı				
	_	ny child,	on _		
		Student Name		Disenroll Date	
from M	yron B. '	Гhompson Academy. My child will be:			
	Transfe	erring to a Hawaii DOE Public or CharterSchool. Name	of School:		
☐ Transferring back to my DOE Regional Public School to Homeschool. Name of School:					
	(Per a directive from the Charter School Office, Homeschool bound students will need to transfer back to his/her DOE School and complete the Homeschool process there) Credits earned via Homeschooling may not be accepted by DOE or Public Charter Schools.				
Reasor	n for Dis	enrollment:			
Sugges		r Improvement:			
*My chi	ild retur	ned all school property (including computer, charger, e	tc.) on		
			Date		
**Comp	outer Ser	ial#:			
Parent	/Guard	ian Signature:	Date:		
Parent	/Guard	ian Cell Phone #:			
MBTA	Official's	s Signature (Tech Department):			
In rega	rds to t	he release forms needed to register my child at the	school listed above, please		
	make t	hem available for pick up in person from MBTA's front	office		
		he documents to the following email address:			
Office U	se Only				
		1 copy of student's VISI and 2 copies of Form 14			
		Form 211 (Release)			
		Student Schedule and Transfer Grades			
		1 copy of student's Transcript			
		1 Copy of BC			
		Exit from PS and CANVAS			
		Email Teachers			
		Send Parent MRTA Fxit Survey			

Revised 9.30.2021