Return to:
Send the Completed Form:
Northwest Ohio Scholarship Fund
P.O. Box 985
Toledo, Ohio 43697-0985
Or Fax: (419) 720-0053

Exit Confirmation Form

Please complete this form if a scholarship recipient leaves your school or informs your school of plans to leave.

1. Student Name _____
   First Name Middle Initial or Name Last Name
2. Parent/Guardian Name(s):_____
3. Name of School _____
   Address _____ City _____ State _____ Zip _____
   Phone _____
4. Student began attending classes during this academic year on ___ / ___ / ___ Total Number of school days in the year ____ Student's last day of class ___ / ___ / ___ Number of days student attended ____
5. Reasons for leaving school (check all that apply)
   - ☐ Moved out of area ☐ Graduated from highest grade offered ☐ Academic difficulties
   - ☐ Disciplinary problems ☐ Could not continue tuition payments ☐ Unknown
   - ☐ Other _____
6. Is this student leaving as the result of a suspension? ☐ Yes ☐ No
   If so, why was the student suspended? _____
7. Has this student been expelled? ☐ Yes ☐ No
   If so, why? _____
8. Please complete the following chart.

	a) Tuition	b) Other Fees
1. Annual Amount		
2. Prorated Amount		
3. Amount Paid by Parents		
4. Amount Paid by NWOSF		$0.00
5. Total Amount Paid (=line 3 + line 4)		
6. Amount Still Owed		

_____ _____

Print name of Principal, Assistant Principal (or equivalent)

Signature of Principal, Assistant Principal (or equivalent)

Title: _____

Date ____ / ____ / _____