



# Sacred Heart Catholic School

Altigracia H. Valles  
Principal

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## Student Withdrawal Form

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

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Student Date of Birth \_\_\_\_\_ ID \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street City State Zip

Name Parent/Guardian Withdrawing Student: \_\_\_\_\_

Reason for Withdrawing (Check all that apply):

- Moving to another town/city/state. Location: \_\_\_\_\_
- Choosing public education
- Choosing different private/parochial education
- Financial struggle
- Personal situation
- Instructional/special student service not available
- Dissatisfied with Sacred Heart. Explain (Use back of form if necessary): \_\_\_\_\_
- Other. Explain: \_\_\_\_\_

New School to Send Records:

School Name \_\_\_\_\_ School District \_\_\_\_\_

School Address \_\_\_\_\_  
Street City State Zip

School Phone \_\_\_\_\_ Fax \_\_\_\_\_

If Homeschooling, name of the homeschooling program: \_\_\_\_\_

I understand that State law requires that a child between the ages of 6 (on or before September 1<sup>st</sup>) and 18 be enrolled in school during the instructional year unless otherwise exempted by law. I understand it is my responsibility as parent/guardian to secure school enrollment for my child immediately after this withdrawal. I also understand I must clear all of my child's pending tuition/incidental expenses/items owed to Sacred Heart Catholic School, or establish a written agreement with the school towards clearing these.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal/School Designee Signature \_\_\_\_\_ Date \_\_\_\_\_

----- Office Use only -----  
 Textbook  Device  Library  Tuition  Fees

RenWeb Input Date: \_\_\_\_\_ Initial: \_\_\_\_\_ FACTS Input Date: \_\_\_\_\_ Initial: \_\_\_\_\_

*"The mission of Sacred Heart Catholic School is to form the hearts and minds of our students in faith development, academic excellence, and leadership with Jesus as our role model." All for Jesus--¡Todo por Jesús! (rev.9/2025)*