



CAC

CAIRO AMERICAN COLLEGE

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ELEMENTARY SCHOOL WITHDRAWAL FORM

STUDENT NAME _____ GRADE _____

Date of withdrawal _____

Please obtain signatures from the following, indicating your son/daughter has been cleared:

Library _____

Student's library account is clear

Student's mother's library account is clear

Student's father's library account is clear

Hot Lunch Service _____

(Elementary Office)

ID Office _____

(Welcome Center)

Please submit this completed withdrawal form to the Registrar's Office from which you may collect your child's school records.