

REQUEST FOR RELEASE
Pontotoc County School District
 285 Hwy 15 By-Pass South
 Pontotoc, MS 38863
 662-489-3932
 662-489-3922 (fax)

I am requesting the release of my child(ren) from PONTOTOC COUNTY SCHOOL DISTRICT to attend _____ SCHOOL DISTRICT for the _____ School Year.

Name	Grade
_____	_____
_____	_____
_____	_____
_____	_____

Reason for Release is _____

Respectfully,

 Signature of Parent/Guardian

 Printed Name of Parent/Guardian

 Mailing Address

 City, State, Zip

Telephone Number _____

FOR OFFICE USE ONLY	
RELEASED FROM PONTOTOC COUNTY SCHOOL DISTRICT	_____ Date
By _____	Superintendent
ACCEPTED BY _____ SCHOOL DISTRICT	_____ Date
By _____	Superintendent