



END OF COURSE - LEAVER FORM

Parent email address:	
Name of student:	
Date of last day of attendance	
Destination - New school name, address and telephone number	
Reason for Leaving Buckswood	
By submitting this form, I agree to provide the information enclosed	<input type="checkbox"/> Yes

By submitting this form you agree for the personal data entered this form to be used & handled in accordance to our data protection/GDPR policy. Our data protection/GDPR policy can be viewed on our website.

Submit to: attendance@buckswood.co.uk, sims@buckswood.co.uk, info@buckswood.co.uk & ict@buckswood.co.uk