

Annual Waiver Renewal Form 2019

(For parents and guardians of 9th-11th grade students who attend a high school other than Thetford Academy, **Due by April 9th, 2019**)

Student Name _____

Current High School _____

I would like my child or ward to continue attending the above high school for the 2019 - 2020 school year for the following reason(s):

I am dissatisfied with instruction provided at Thetford Academy.

I cannot obtain for my child or ward a desired kind of course or instruction at Thetford Academy.

My child or ward can be better accommodated in an approved independent or public high school nearer my home.

(Please check at least one.)

Date Signature

Please return the completed form to:
Newton School Board of Directors
The Newton School
P.O. Box 239
S. Strafford, VT 05070.