Exit Confirmation Form
D.C. Opportunity Scholarship Program
August 1, 2020 – July 31, 2021

SECTION 1: Complete within ten (10) days if a D.C. Opportunity Scholarship Program (OSP) student is no longer attending the school or has five (5) or more consecutive days of unexcused absences.

SECTION 2: to be completed by Serving Our Children

SECTION 3: Sign after final invoicing computations is completed by the OSP Manager, Finance & Operations.

Please fax completed form to (202) 330-5002 or email to robertu@servingourchildrendc.org

Section 1: Report of Student Exit to OSP Administration

Name of Student: _________________________
Name of Parent/Guardian: _________________________
Exiting School:

1. Last day of attendance: _________________________
2. If applicable, student never attended in 2018-19: ☐
3. Please select the reason for the exit from your school:

☐ Moved out of DC ☐ Transportation challenges
☐ Expense over scholarship stipend ☐ Disciplinary reasons / Expulsion
☐ Family challenges ☐ Academic difficulties
☐ School could not accommodate special needs ☐ Parental dissatisfaction with the school
☐ Other: _________________________

Section 2: Computation of Student’s final settlement of scholarship

<table>
<thead>
<tr>
<th>Fee Description</th>
<th>Amount</th>
<th>Fee Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
<td>$</td>
<td>Uniforms</td>
<td></td>
</tr>
<tr>
<td>Registration</td>
<td></td>
<td>Before / After Care</td>
<td></td>
</tr>
<tr>
<td>Activity</td>
<td></td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Books</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cafeteria</td>
<td></td>
<td>Subtotal</td>
<td>$</td>
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<tr>
<td>Graduation</td>
<td></td>
<td>Paid</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total</td>
<td>$</td>
</tr>
</tbody>
</table>

Section 3: School Certification

I hereby certify that all the information on this form is correct with respect to the dates of enrollment. I hereby accept the computations cited above as the final settlement of all tuitions, charges, and fees incurred for the period of enrollment by the aforementioned student.

Signature of School Official _________________________ Name of School Official (Please Print) _________________________ Date _________________________

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