Christa McAuliffe Phone: 239-283-4511
Oasis Elementary Phone: 239-542-1577
Oasis Middle Phone: 239-945-1999
Oasis High Phone: 239-541-1167
Nelson Stephenson, Superintendent

Seat Decline Form
2017-18 School Year

Student Name: _____

Current Teacher: _____

Current School:

❒ Christa McAuliffe ES ❒ Oasis ES ❒ Oasis MS ❒ Oasis HS

The signature at the bottom of this form serves as official notification to the City of Cape Coral Charter School Authority that the seat reserved for the above named student in our school system is ***declined* by the parent or legal guardian.**

☒ *I **DECLINE** the seat assigned to the above named child for the 2017-18 school year.*

Reason for declining _____

The following information pertains to your student's **NEW** school.

School Name _____

City _____ State _____

□ Public □ Private □ Charter □ Home School

_____

PRINT REGISTERING PARENT/GUARDIAN NAME

_____

SIGNATURE REGISTERING PARENT/GUARDIAN ***Date***