



EARLY WITHDRAWAL FORM 2018-2019

Students wishing to withdraw from the Otto M. Budig Academy must do so by formally submitting an early withdrawal form to the Academy Administrative Office. Informing your student's teacher does not qualify as formal notification of withdrawal. Failure to return to class is not considered formal notification of withdrawal.

You will continue to be responsible for the full price of tuition unless your student falls under any one of the following criteria:

- Withdrawal forms are submitted to the Academy Administrative Office within the first two weeks of classes in the Fall (Main Division: August 20– Sept 2; Children's Division: Sept 10 –23) or the first two weeks of January (both divisions: Jan 2 –14). The effective date of withdrawal will be the date the Early Withdrawal Form is received by the Academy Administrative Office.
- Withdrawal forms are accompanied by a signed physician's note indicating the student cannot continue dance instruction due to a medical condition within four weeks of the onset of the condition. The effective date of withdrawal will be the date indicated in the physician's note.
- Withdrawal forms are accompanied by documentation of family relocation from the Greater Cincinnati area within four weeks of relocation. The effective date of withdrawal will be the date indicated in the relocation notice.

Tuition refunds for those who fall within the above criteria will be pro-rated according to the number of remaining classes. Families who do not submit withdrawal forms, who submit them outside the time frames indicated above, or who do not fall within the above criteria are still responsible for the full-year tuition amount for their student.

WITHDRAWAL FORM

Student Name: _____ Class Level: _____

Parent Name: _____

Effective Date of Withdrawal: _____ Student's Last Day of Class: _____

Is withdrawal due to a medical condition? Yes No

If yes, please attach a letter from your student's physician stating the medical condition and the inclusive dates the condition interfered with Academy class attendance. A physician letter is required to make adjustments to your student's account.

Is withdrawal due to relocation from the Greater Cincinnati area? Yes No

If yes, please include proof of relocation including effective dates of move.

Other reason for withdrawal: _____

Does your student intend to resume studies at the Academy in the future? Yes No

Parent/Guardian Signature

Date

Please complete and return this form to:
Cincinnati Ballet Otto M. Budig Academy; Attn: Registrar
1555 Central Parkway, Cincinnati, OH 45214
cbacademy@cballet.org