



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 2016-17 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 2016-17 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**