

HOME SCHOOLING
(Written Declaration of Enrollment)

Please return the completed form to the Special Services Office.

My Child/Children will attend a Home School.

Following is a listing of the name(s), Age(s), and Grade(s) of the students who will be attending the Home School:

Name: _____ Age: _____ Grade: _____

Name: _____ Age: _____ Grade: _____

Name: _____ Age: _____ Grade: _____

Name: _____ Age: _____ Grade: _____

Name: _____ Age: _____ Grade: _____

Individual(s) Teaching in the Home School: _____

Name of Home School: _____

Address: _____

Phone: _____

I understand that this Written Declaration of Enrollment will only be effective until September 1 of next year. If I want the district to maintain a record of my child/children's enrollment in a Home School, I should fill out a new written declaration of enrollment by September 1 every year.

Parent/Guardian Name: _____

Address: _____

Phone: _____

Parent/Guardian Signature: _____ Date: _____