

HOME EDUCATION LETTER OF INTENT

Date _____

Ms. Marianne Arbulu, Superintendent
School District of Jefferson County
1490 West Washington Street
Monticello, FL 32344

To Ms. Arbulu, Superintendent:

This letter is to inform you of our intent to establish and maintain a home education program for our child, according to Florida Statute 1002.41

Child's name _____

Child's date of birth _____

Sincerely,

Parent Signature

Parent's name (please print) _____

Mailing address _____

HOME EDUCATION FOLDER

Student Name: _____ Current Grade: _____

D.O.B. _____ S.S. # _____ Sex: _____ Race: _____

Last School Attended: _____

School ID# _____ W/D Date (last school) _____

Parents/Guardians:

Mother: _____ first _____ last _____
 Father: _____ first _____ last _____

Address: _____ City: _____ State: _____ Zip: _____

Phone(s): Home _____ Work _____ Cell _____

Email: _____

For Office Use Only:		Home Education Entrance Date: _____	
2016-2017 Grade: _____	2017-2018 Grade: _____	2018-2019 Grade: _____	2019-2020 Grade: _____
2020-2021 Grade: _____			

Evaluation *	Evaluation *	Evaluation *	Evaluation *
*Dist reminder sent _____ *Teacher letter _____ *Portfolio _____ *Test Scores _____	*Dist reminder sent _____ *Teacher letter _____ *Portfolio _____ *Test Scores _____	*Dist reminder sent _____ *Teacher letter _____ *Portfolio _____ *Test Scores _____	*Dist reminder sent _____ *Teacher letter _____ *Portfolio _____ *Test Scores _____

Withdrawal from Home Education Date: _____

** copy placed in student folder