

Northshore School District

DISTRICT FORM

3114

NORTHSHORE SCHOOL DISTRICT No. 417

DECLARATION OF INTENT

Home-based Instruction

A parent, guardian or person having legal custody of a child and intends to cause his or her child to receive home-based instruction, shall file annually a signed declaration of intent that he or she is planning to cause his or her child to receive home-based instruction by September 15th of each school year or within 2 weeks of the beginning of any public school quarter, or semester with the superintendent/ designee of the public school district in which they reside.

I do hereby declare that I am the parent, guardian or legal custodian of the child or children listed below and that said child or children is (are) between the ages of eight and eighteen and, as such, is (are) subject to the requirements found in Chapter 28A.225 RCW regarding Compulsory Attendance. I intend to cause said child or children to receive home-based instruction as specified in RCW 28A.225.010(4). If a certificated person will be supervising the instruction, I have indicated this by checking the appropriate space below.

[ ] The home-based instruction will be supervised by a person certificated in Washington State pursuant to Chapter 28A.410 RCW.

Table with 7 columns: Last, CHILD(REN)'S NAME(S) (First, M.I.), Birth date, Grade Level, Last School Attended. Includes four rows of blank lines for data entry.

Parent Name (Please Print), Date, Parent Signature, School Year, Street Address, Home Phone, City/State/Zip

If not Northshore School District, do you have a waiver to attend our program in the Northshore School District? YES/NO

Resident School District \_\_\_\_\_

Return to: Student Services, 3330 Monte Villa Parkway, Bothell, WA 98021, nsdwaivers@nsd.org, 425 408 7729 (fax)

For the purpose of Washington State Reporting requirements indicate the names of your child(ren) under age eight (8) who are being home schooled(home based) and/or who are active in a Northshore Home School Networks Program.

| CHILD(REN)'S NAME(S) |       |       | Birthdate | Grade Level |
|----------------------|-------|-------|-----------|-------------|
| Last                 | First | M.I.  |           |             |
| _____                | _____ | _____ | _____     | _____       |
| _____                | _____ | _____ | _____     | _____       |
| _____                | _____ | _____ | _____     | _____       |