

NOTICE OF INTENT
HOME SCHOOL INSTRUCTION

Student Name _____ Date of Birth _____

Student's Address _____

Grade Level _____ Grade Level That Home Schooling Began _____

Parent's Name _____ Phone _____

The following subjects will be taught: (check all that apply)

_____ Reading

_____ Science

_____ Writing

_____ Social Studies/History

_____ Spelling

_____ Geography

_____ Grammar

_____ Civics (Grade 9)

_____ Mathematics

_____ Citizenship

_____ other (please specify) _____

I acknowledge and accept full responsibility for the education of my child in accordance with state law and section 10-184 of the state statute.

Parent Signature

Date

I would like my _____ Annual Portfolio Review to occur on _____ at _____.
(school year) (date) (time)

I only acknowledge receipt of this form and render no opinion as to the adequacy of the planned program.

Superintendent of Schools

Date