Annual Written Home Education Evaluation Form

Mail completed form to: Flagler Schools--Attn: Home Education Office PO Box 755 Bunnell, FL 32110

Upon Review of the portfolio and discussion with the pupil named below, I have found that the pupil **has or has not** (circle one) demonstrated progress at a level commensurate with his/her ability as specified in Florida State Statute 1002.41, paragraphs (1) (c 1).

Signature of Florida State Certi	fied Teacher/ Evaluator
Certification Number	Date of Expiration
Pupil Full Name	
Pupil's Date of Birth	(OPTIONAL) Pupil's Grade Level Completed for this Evaluation Period
□ Pupil has demonstrated Prog	gress
Pupil's Address	
Parent/ Guardian Name	
Date of Evaluation	

Office use only	
Received by _	Date