

HOMEBOUND PARENT REQUEST FORM ACKNOWLEDGEMENT BY PARENT/GUARDIAN FOR THE REQUEST OF HOMEBOUND SERVICES

| Parent Name: | |
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| Upon y | your child's homebound eligibility determination, based on the service location, you must agree to the following: |
| <u>In Hon</u> | ne Service: |
| 1. | To provide a quiet, clean, well-ventilated setting where the student will work. |
| 2. | To keep visitors, pets, siblings, and other children out of the room during instructional time. |
| 3. | To ensure that my child meets homework and all other assignment deadlines. |
| 4. | If cancellation of a Homebound visit is necessary, you must notify the teacher at least two hours prior to services. |
| 5. | A responsible person aged 18 or over will be present in the home at all times homebound services are being provided. This cannot be the student receiving homebound services. |
| Site-Ba | ased Service: |
| 1. | Student and Parent/Guardian must attend intake meeting as scheduled by homebound teacher. |
| 2. | Site-based services will be delivered at Odenville Intermediate School. |
| 3. | Student must be dropped off and picked up from site location. Only the student will be allowed to enter the site location for instructional services. |
| 4. | Dress Code according to the St. Clair County Student Code of Conduct will apply for site-based service. |
| I ackno | owledge the request for homebound services and agree with the need for homebound services |

Please return the completed form to (must be mailed): St. Clair County Board of Education Homebound Services

Date

Parent/Guardian Signature

410 Roy Drive

Ashville, Alabama 35953 If you have additional questions, please call 205-594-7**131**