

Cecil County Public Schools

HOME INSTRUCTION ANNUAL VERIFICATION

School Year 2024-2025

PORTFOLIO REVIEWS ARE DUE IN JANUARY AND MAY

CONFIDENTIAL

This form is to be completed only for those families who participated in a home instruction program for the previous academic year. If completing this form is a hardship, please email homeinstruction@ccps.org or call 410-996-5490.

1. Name of Parent/Guardian: _____

Address: _____

City: _____

Telephone: _____ Email: _____

2. Please complete the following information for each child who will continue to be home instructed during the 2024-2025 school year.

Legal Last Name	First Name	Male	Female	D.O.B. (month/year)	Grade Entering 2024-2025

3. Will you continue with home instruction for those students listed above for the 2024-2025 academic year? _____ Yes _____ No

4. Are you registered with an umbrella program? _____ Yes _____ No

If yes, name the umbrella program. _____

Parent/Guardian Signature: _____

Date: _____

Please return this form to: Cecil County Public Schools, 201 Booth Street, Elkton, Maryland 21921
or email homeinstruction@ccps.org, or fax 410-996-5454.

FOR OFFICE USE ONLY

Signature of Staff Receiving Form

Title

Date