Emanuel County Schools Home School Part-Time Enrollment
SB 42 Participation Declaration From For School Year 2024-2025

Emanuel County Schools recognizes the need for home school students to be offered support services and be afforded the opportunity to participate in designated school activities as a vehicle to develop and enhance their educational experience, as well as for social and community relations. In accordance with Senate Bill 42: "The Dexter Mosley Act," a home school student may enroll in a qualifying course at his/her designated school within the attendance area of the student's custodial parent's primary residence and participate in extracurricular or interscholastic activities.

Demographic Information

Student Name: _____Parent Name: _____

School of Residence: _____SY2024-25 Grade Level: _____

Home School: _____

Permanent Address: _____City: _____ Zip: _____

Phone/Contacts: (1) _____ (2) _____

Sports/Activities: _____

Enrollment Acknowledgement

- I understand my student must be registered in Emanuel County Institute (6-12), Swainsboro Middle School (6-8), or Swainsboro High School (9-12) and this declaration must be submitted to the school of residence 30 calendar days prior to the first day of the semester.
- I understand my student must maintain enrollment in one course per semester to remain eligible for extra-curricular and interscholastic athletics.
- I understand my student must adhere to attendance requirements per Emanuel County Schools Student Handbook.
- I understand my student must meet the same eligibility requirements as full-time students (accumulated units, units passed previous semester, etc.).
- I understand my student must reside in the attendance area of his/her custodial parent's primary residence.
- I understand my student is ineligible for School Choice consideration and must participate in the school of residence.
- I understand my student must follow the Emanuel County Schools Code of Conduct.
- I understand withdrawal of my student from Emanuel County Schools to home school full-time will result in the loss of eligibility for one calendar year.
- I understand my student is ineligible to participate in the high school's graduation.

Parent Signature: _____ Date: _____

This completed form must be included along with other required information in the student enrollment packet.