



NOTICE OF INTENT TO ESTABLISH A HOME EDUCATION PROGRAM

In compliance with Section 1002.41(1)(a), Florida Statutes, this serves as written notice to establish and maintain a Home Education Program for the following student(s):

Effective date of your student's home education program: \_\_\_\_\_  
(mm/dd/yyyy)

Child(ren)'s Name:	Date of Birth & Grade
_____	_____
_____	_____
_____	_____
_____	_____

Home Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent's Email \_\_\_\_\_

Phone: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print: \_\_\_\_\_ Date: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Mail/Email to:  
Bradford County School District Home Education Department  
501 W. Washington Street  
Starke, FL 32091  
(904) 966-6849  
Email: [Richardson.Stephen@mybradford.us](mailto:Richardson.Stephen@mybradford.us)

\*\*\*Home Education Program Termination form is provided for the parent/guardian's convenience and is optional. A written letter may be used in its place\*\*\*