LETTER OF TERMINATION
(Please print all information)

Dear Superintendent:

It is my intention to no longer home educate the following child(ren):

Student Name	Date of Birth	Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The date of termination is _____.

The reason is (check one):

_____ The child has been or will be enrolled in a public, parochial, or private school.

Name of School: _____

_____ The child has reached age sixteen (16), and is no longer of compulsory school age.
I understand that until my child reaches the age of 18, if he/she is not enrolled in a Florida approved educational setting, he/she is subject to denial of a driver's license or suspension of driving privileges.

_____ The child will no longer reside in Baker County, Florida. The new residence is located at:

_____
Address City State

Other: _____

_____

_____ _____
Home Education Parent/Guardian's Signature Date

Address: _____

_____
City State Zipcode

Return to:
Superintendent of Schools
c/o Director of Student Services
420 S. 8th Street
Macclenny, FL 32063