NOTICE OF INTENT: INSTRUCTION OF STUDENT AT HOME

(Parent/Guardian-Submit completed form to the Office of the Superintendent of Schools)

Name of Student: _____ Date of Birth: _____

Address: _____ Telephone #: _____

Name of Teacher: _____

Address: _____

Telephone #: _____ FAX: _____

THE SUBJECTS TO BE TAUGHT ARE:	YES	NO
(REQUIRED)		
Reading		
Writing		
Spelling		
English Grammar		
Geography		
Arithmetic		
U.S. History		
Citizenship (including a study of Town, State, and Federal Governments)		
(RECOMMENDED)		
Science		
(OTHER)		

Total number of days scheduled for instruction: _____

Teacher's methods of assessment of Student Progress:

_____

_____

_____

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An annual Portfolio Review of student's work will be held on or about: _____.
Date

I acknowledge and accept full responsibility for the education of my child in accordance with the requirements of State Law.

_____ _____
Parents Date

I only acknowledge receipt of this Form and render no opinion as to the appropriateness of the planned program.

_____ _____
Superintendent Date