E310- REQUEST FOR HOME/HOSPITAL INSTRUCTION

South Whidbey School District Office of the Superintendent 5476 Maxwelton Road Langley, WA 98260	CHECK ONE: ☐ Original Request ☐ Extension NOTE: Beginning date on extension request must consecutively follow ending date of original request

STUDENT INFORMATION: PLEASE PRINT

Student Name: (last, first, middle initial)		School Student is Enrolled:	Grade Level:
Parent/Guardian's Name:	Phone Number:	Enrolled in Special Education?	Gender:
		☐ Yes ☐ No	M F
I authorize release of information to South Whidbey School District concerning this condition.		Signature: _____	

SECTION 1: TO BE COMPLETED BY QUALIFIED MEDICAL PRACTITIONER

DIAGNOSIS:

☐ Disease/Injury (specify primary diagnosis)	☐ Drug/Alcohol Treatment
☐ Pregnancy/Postpartum	☐ Other (specify)

☐ I certify that this student is physically unable to attend school because of his/her own medical condition for _____ weeks starting _____.

☐ I certify that this student is physically unable to attend school because of her pregnancy starting _____ and continuing for ____ weeks postpartum due to her own medical condition.*

☐ I certify that this student is physically unable to attend school for ____ weeks postpartum due to her own medical condition.*

* School or tutor must call with delivery date! If delivery or recovery is complicated and more recovery time is needed, submit an extension for longer service.

Name of Qualified Medical Practitioner:	Phone Number:	Business Address:
Signature:	Date:	

SECTION 2: TO BE COMPLETED BY DISTRICT OFFICE

Review Date:		☐ Approved ☐ Denied	
Start Date:	# of Weeks:	Tutor:	

Questions? Call Office of the Superintendent: (360) 221-6808 ext 2245 Fax: (360) 221-3835

GUIDELINES FOR DISTRICT ADMINISTRATION OF THE HOME/HOSPITAL INSTRUCTION PROGRAM

REQUEST

The procedures for instituting home/hospital instruction are as follows:

1. Parent completes Section 1 of request for home/hospital instruction.
2. The family physician completes Section 2 of request for home/hospital instruction form.
3. Home/hospital instruction shall begin after district receives completed request for home/hospital instruction form.

Eligibility

1. A student must be enrolled in the South Whidbey School District.
2. A written statement by a doctor of medicine, (M.D.), osteopathy, (D.O.), naturopathy (N.D.), dentistry, (D.M.D.), chiropractic, (D.C.), or physician assistant (PA); advanced registered nurse practitioner, (ARNP); or licensed mental health therapist indicating that the student is unable to attend school due to physical disability or illness for at least four weeks from the date of the application, but not more than eighteen weeks, must be provided.

Program Requirements

1. Tutoring is provided for students absent a minimum of four weeks but less than a semester. In some cases tutoring may be intermittent, but weeks of tutoring may not exceed eighteen weeks. Students with intermittent absences may not receive H/H services in a week in which they attended school at least a ½ day twice in that week. Elementary instruction emphasizes reading, math, and language skills. Secondary instruction emphasized instruction in required subjects.
2. Home/Hospital instruction may be provided while a student is being assessed for eligibility for special education services.
3. If a student has a special education health-impaired designation or is receiving 504 accommodations, work with the school's Section 504 coordinator and the IEP-responsible staff to determine appropriate services.
4. Home/Hospital tutoring is not provided during school vacations unless the student is enrolled in a district summer school program.
5. Home/Hospital instruction is for the student who is unable to attend school due to disability or illness. It may not be used for a student who is staying at home with an infant or a sick relative.

Program Provisions

If the Home/Hospital application is approved the student is approved for two hours of tutoring per week. This will not provide a complete educational program but will assist a student in maintaining his/her educational status when absent from school temporarily. Please encourage the student to resume school attendance and participation in a complete educational program as soon as s/he is able.