

Greenwich Public Schools
Notice of Intent
Instruction of Student at Home
2026-2027

Name of Student: _____

Date of Birth: _____

Address: _____

Parent Phone: _____

Parent Email: _____

Student's Districted School: _____

Grade: _____

Name of Home School Teacher: _____

Teacher Phone: _____

Address: _____

☐ **NO,** I do not intend to instruct my child at home.

My child will attend _____ school.

Stop! Please go directly to the back of this form and sign and date it.

☐ **YES,** I intend to instruct my child at home.

Please fill out the remainder of this form completely.

SUBJECTS TO BE TAUGHT (Required)	YES	NO
Reading		
Writing		
Spelling		
English Grammar		
Geography		
Arithmetic		
U.S. History		
Citizenship		
Science (Recommended)		
Other:		

Total number of **days** scheduled for instruction: _____.

Date student will withdraw from Greenwich Public Schools and start home schooling:_____.

Teacher's methods for assessing student progress:

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

Name of Parent(s) (PLEASE PRINT)

Parent(s) Signature

Date

FOR OFFICE USE ONLY

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

Dr. Toni Jones
Superintendent of Schools
Greenwich Public Schools

Date