CENTRAL BERKSHIRE REGIONAL SCHOOL DISTRICT

254 Hinsdale Road • P.O. Box 299 • Dalton, Massachusetts 01227-0299
Administrative Offices (413) 684-0320 or 684-0325
Business Office (413) 684-1792
FAX (413) 684-4088

Dr. Michael Henault
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Assistant Superintendent
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Director of Finance and Operations
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Notice of Intent to Pursue a Program of Home Education
Academic Year 2026-27

Please complete this form, attach any additional information, and forward it to the Assistant Superintendent, 254 Hinsdale Road, P.O. Box 299, Dalton, MA 01227-0299 prior to the starting date of the home education program. Alternatively, this form can be emailed to arobb@cbrsd.org. Expect a response to this form within ten business days. If this process is initiated during the school year, the student must remain in school until the district and the parents jointly agree on the home education plan.

If a * star is indicated, this information must be completed on the form for approval.

***Please check one of the following and fill in the beginning instruction date.**

____ New Notification Form. If new, is the student currently enrolled in CBRSD? ____Yes _____ No

If marked no, list the school or homeschool program that the student is currently enrolled in.

_____

____ Renewal Notification Form (***must be accompanied by proof of academic progress from 2025-26***)

Date for beginning home instruction. _____
_____

***Parent Name**: _____

***Address:** _____
Street **Town** **Zip Code**

***Email:** _____ ***Phone Number:** _____

*Student Name	*Birthdate	*Grade	*Special Education Services

***B. On a *separate sheet*, describe the instructional program to be taught, including subjects, instructional aides to be used, and the educational goals of the home education program.**

*** C. On a *separate sheet* please explain your academic background, life experience and / or qualifications of those who will be instructing the child(ren), as they relate to the instructional program described in Section B.**

***D. Check the methods of assessment to be used, followed by a brief description.**

( ) Daily logs, journals, progress reports, portfolios, or dated work samples.

( ) An independent report made by someone acceptable to the assistant superintendent and parent(s) or guardian(s).

( ) Standardized test results

( ) Consultation with the assistant superintendent or the appropriate school principal.

( ) Any other method agreed to by both the assistant superintendent and home educator(s).

Please note: By June 30th, the Parent/Guardian is required to provide Central Berkshire Regional School District's Assistant Superintendent with an annual evaluation of the student's academic progress.

A Renewal Notification Form, along with supporting documents, must be provided for the upcoming academic year if the Parent/guardian wishes to continue homeschooling for the year.

The following signature confirms the intent to provide a minimum of 900-990 hours of instruction, depending on grade level.

_____ _____

Signature of Parent or Guardian Date submitted.

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For Central Office Only:

Date Received: _____ Date Accepted_____

Documents Missing:

_____ None
_____ Instructional program.
_____ Academic background, life experience, and/or qualifications of Instructor.
_____ Proof of Academic Progress for renewal

The signature of the school official indicates final approval of this plan. A parent/administrative conference may be scheduled.

_____ _____

Aaron Robb, Assistant Superintendent Date of Response

Failure in a home educator to abide in good faith by the procedures outlined above may result in the School Committee taking action under Massachusetts General Law, Chapter 72, Sections 2 and/or 4, upon the recommendation of the Superintendent. CHINS proceedings pursuant to Massachusetts General Law, Chapter 119, Section 21, will not be invoked for any child pursuing a home education program. (REF: M.G.L. Chapter 76, Sections 1, 2, and 4, Charles decision)

The Central Berkshire Regional School District does not discriminate on the basis of race, religion, color, age, gender, national origin, disability, homelessness, sexual orientation, gender identity or veteran status. Equal Opportunity Employer.