

Alachua County Public Schools
Home School Department
(352) 955-7620

Enrollment Form for Home Education Program

Name of Student (Last, First, Middle) <i>(Required)</i>		Social Security Number <i>(Optional)</i>	Grade Level <i>(Optional)</i>
Date of Birth <i>(Required)</i>	Gender <i>(Optional)</i>	Race <i>(Optional)</i>	Telephone Number <i>(Optional)</i>
Mailing Address <i>(Required)</i>		City <i>(Required)</i>	Zip Code <i>(Required)</i>
Residential Address <i>(Optional)</i>		City <i>(Optional)</i>	Zip Code <i>(Optional)</i>

Beginning date of Home Education Program: _____

Parent Name (please print) <i>(Required)</i>	Parent Signature <i>(Required)</i>
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Florida Law requires parents to provide their local school board with a 'letter of intent' to home educate their child. Completing this form fulfills this requirement. Information designated 'Optional' is not required by law. Information designated 'Required' is required by law (Florida Statue 1002.41)

Please return this form to: Home School Office
Alachua County Public Schools
620 East University Avenue
Gainesville, FL 32601