

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

Notification of Termination of Home Education Program

In compliance with Section 1002.41(1)(a), Florida Statutes, this is written notice of my intent to terminate the home education program for my child(ren) listed below.

	Child's Name	Birth Date
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

Parent Signature Date

Mailing Address City Zip Code

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