



Duval County Public Schools | Office of School Choice | Home Education Department
HomeEducation_SchoolChoice@duvalschools.org

Notice of Intent to Establish a Home Education Program
Please complete one form for each student.

In compliance with section 1002.41 (1) (a), Florida Statutes this is written notice from the parent/guardian to establish and maintain a home education program for the following student. The parent/guardian is responsible for maintaining his/her student's complete portfolio and learning log as well as submitting results of annual evaluations in compliance with section 1002.41, Florida Statutes.

Effective date of your student's home education program here: _____
(MM/DD/YYYY)

Please Print Legibly:

Student First Name:

Student Last Name:

Date of Birth (mm/dd/yyyy):

Male/Female:

Grade:

I have withdrawn my child from the following school:

Race:

White

Black

Hispanic

Asian

American Indian

Multiracial

Student Identification Number:

Parent/Guardian Name:

Telephone:

Home Address:

City/State/Zip Code:

Email Address:

I currently reside at the above Duval County Address. I understand this is subject to verification. I understand that an original Annual Evaluation will be due on or before the anniversary date of enrollment into Home Education. The Home Education Office does not issue a high school diploma.

Parent/Guardian Signature:

Date:

By adding your name to the box above, you are agreeing to sign this document electronically, and that your electronic signature is the legal equivalent of your manual signature on this application. You are also certifying that your answers are true and correct.

Email Completed Forms to: HomeEducation_SchoolChoice@duvalschools.org