

Home Education Program Notice of Intent

School Board of Polk County
Home Education Office

604 Central Ave S | Lakeland, Florida 33815

(863) 225-1141

Home.Education@polk-fl.net



POLK COUNTY
PUBLIC SCHOOLS

STUDENTS FIRST

In accordance with Section 1002.41(1), it is my/our intent to establish and maintain a Home Education Program in Polk County, Florida to begin on date: _____

Parent/Guardian Name(s): (please print or type)

First

MI

Last

First

MI

Last

*Street Address (number and street)

City

State

Zip Code

*Mailing Address (if different from street address)

City

State

Zip Code

*Work Phone

*Home Phone

*Email Address (For notices, updates, and events.)

List all children who will be enrolled in the Home Education Program – (please print or type)

| *Name (First, MI, Last) | *Birth Date | *Sex | *Race | *Last School Attended | *Special Programs | *Current Grade |
|-------------------------|-------------|------|-------|-----------------------|-------------------|----------------|
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*Only the name, address, and date of birth are required by law for home education students. Additional information is optional but helpful for record keeping purposes.

If a student participates in any extracurricular activities at their zoned school, they must comply with all enrollment requirements (birth certificate, shot record, and physical).

All Home School Students are required to submit an Annual Evaluation. For example: If your entry date is June, your evaluation is due the following June. Failure to submit a yearly evaluation will result in termination from Home Education. Students terminated for non-compliance of yearly evaluation cannot re-enter Home Education for 180 days.

I do hereby agree with the statements above and I am aware the Polk County School District is not authorized to award High School Diplomas to Home Education Students.

Parent/Guardians' Signature: _____ **Date:** _____

Email or mail completed form to the School Board of Polk County

To be completed by the School Board of Polk County

Rec'd SBPC: _____ Notify Parent: _____ Notify School: _____ FLVS: _____ Database: _____ Scanned: _____