FILE FORMS EVERY YEAR: PART A AND B must be returned to the Superintendent's Office EACH YEAR no later than August 15, or by December 15 to begin home schooling the second semester, or during the year with a 14-calendar day waiting period. The Superintendent or local School Board has the authority to waive the 14-day waiting period.

Please retain a copy of the completed form for your files.

2009-2010 School Year

(Do not modify/revise ADE forms)

District LEA # _____

(District use only)

Submit all forms to Superintendent's Office ONLY

TESTING: State law requires that home school students in grades 3 through 9 test every year. The tentative test dates for home school students will be April 5-16, 2010. Please check the Home School Testing website for more information at http://www.arhomeschooltesting.org Parents/legal guardians that are registered for the current school year will receive written notification of the test dates, times, and sites. Please notify the Arkansas Home School Testing Office if there is a change in address.

Notice of Intent to Home School

Arkansas Department of Education-Home School Office (501) 682-1874

http://arkansased.org/schools/schools_home.html

PART A – Please print (forms must be legible to be accepted)

In accordance with the procedures established for the Implementation of Act 1117 of 1999, I/we hereby **give notice to** _____, **Superintendent** of the

_____ **School District**, _____ **County**, of my/our intent to provide home instruction to my/our own child(ren) located at:

_____, _____, AR _____, **beginning date for 2009-2010** _____.

Print or Type Parent's Address **City** **Zip** **(Month/Day/Year)**

Parent's mailing address if different from above: _____ **(for mailing test notification/results)**

Further, I/we agree that my/our child(ren) will take a nationally recognized standardized achievement test as required in A.C.A. 6-15-504. The test will be administered to students in grades 3 through 9 during the testing window for the current school year. The Arkansas Department of Education recommends that you notify the local school district of any change of address or if you discontinue to home school. ***In order to maintain legal home school status, current year forms must be filed every year by the established deadlines. During the school year, new forms must be submitted within 30 days of the parent(s) moving to a new school district.***

2009-2010

_____ (_____) _____ _____

PRINT *name of* parent/guardian *Phone Number (Optional)* *Occupation (Optional)* **Today's Date**

No approval letter or curriculum will be sent.

Student Information

Name of School Last Attended:

***PRINT or TYPE* STUDENT'S NAME**				**Date of Birth**	**Sex (Circle one)**	**GRADE LEVEL COMPLETED LAST SCHOOL YEAR (Circle one)**	**GRADE LEVEL STUDENT IS IN THIS YEAR** **STUDENTS IN GRADES 3 through 9 MUST TEST (Testing - April 2010)**	**Permanently Exempt from Home School Testing Grades 3-9** ***Per Home School Test Coordinator*** **Place check in box**	**Type of School Last Attended (Circle one)**
***Student has an IEP on file**	***Please print clearly and legible*** **Give Full Legal Name** **FIRST**	**MIDDLE**	**LAST**	**Month/Day/Year**					
					M F	0 K 1 2 3 4 5 6 7 8 9 10 11			Public Parochial Private Home
					M F	0 K 1 2 3 4 5 6 7 8 9 10 11			Public Parochial
					M F	0 K 1 2 3 4 5 6 7 8 9 10 11			Public Parochial
					M F	0 K 1 2 3 4 5 6 7 8 9 10 11			Public Parochial
					M F	0 K 1 2 3 4 5 6 7 8 9 10 11			Public Parochial
					M F	0 K 1 2 3 4 5 6 7 8 9 10 11			Public Parochial

Arkansas Code Annotated § 6-15-501 through § 6-15-508

*IEP-Individualized Education Programs

PARENTS/LEGAL GUARDIANS MUST FILE UPDATED FORMS EVERY YEAR Form Revised May 2009

***** PARENTS/LEGAL GUARDIANS MUST FILE UPDATED FORMS EVERY YEAR. *****

Page Must be completed - Curriculum (Required information: DISTRICT OFFICE, do not accept this form if this section is blank.)

Give a brief description of the basic core curriculum to be used and include **a list of the subjects to be taught**.

Class Schedule (Required information: DISTRICT OFFICE, do not accept this form if this section is blank.)

Describe the schedule planned for your home school. ***(Include the hours per day, days per week, number of weeks)***

Educational Qualifications of Parent/Teacher(s) (Required information, do not leave blank)

(Circle the highest level of educational attainment.)

2009-2010

Print or Type **Name of Parent/ Guardian**	**Parent/Guardian (Circle one)**	**School (Circle one)**	**College (Circle one)**	**Degree (BA, etc.)**	**Name & Address of Institution**
	Parent Guardian	6 7 8 9 10 11 12 H.S. Grad.	1 2 3 4 Col. Grad.		
	Parent Guardian	6 7 8 9 10 11 12 H.S. Grad.	1 2 3 4 Col. Grad.		

DRIVER'S PERMIT/LICENSE SECTION ONLY APPLIES FOR STUDENTS 14 YEARS OF AGE OR OLDER.

This section applies only to parents that would like for their child to apply for a driver's permit or license during the 2009-2010 year.

Arkansas Department of Education Rules and Regulations Governing Home Schools 10.00 States: "A student enrolled in a home school shall present proof of home schooling in the form of a notarized copy of the Notice of Intent to Home School. The parent/guardian has the responsibility of providing the notarized copy."

Please call the Home School Office at 501-682-1874 if you have questions. Make a copy of this form and have the COPY notarized when seeking a driver's permit or licenses.

Notary Seal

Signature of Notary Date

Parent Signature Date

Arkansas Code Annotated § 6-15-501 through § 6-15-508

Form Revised May 2009

Please retain a copy of the completed form for your files.