THE SCHOOL BOARD OF BROWARD COUNTY



Notice of Intent of Home Education Program

Use of this form is optional. It is provided for the parent's/guardian's convenience. Please complete one 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.

Please Print Legibly:

Please Print Legibly:				
STUDENT NAME	DATE OF BIRTH	MALE/FEMALE	GRADE	I have withdrawn my child from the following school
Parent/Guardian Name Telephone				
Home Address		City		Zip Code
Email Address				
An original Annual Evalua		m establishing a Home ance will be subject to e the anniversary d a	e Education p monthly port ate of enrolln	rogram. folio reviews. nent into Home Education.
	Signature of Parent/Guardian		Guardian Date	
If the office is unable to proces forms via mail, email or fax:	s the above request, the telep	hone number and/or e	email listed ab	ove will be used to contact you. You can send completed
Addre	Home Education	nors Early Learning		esource Center
	Fort Lauderdal	le, FL 33311		

www.browardschools.com/homeed

(754) 321-1558

(754) 321-1694

Home.education@browardschools.com

Website:

Email:

Fax:

Phone: