

NOTICE OF INTENT TO PROVIDE HOME INSTRUCTION

I am providing notice of my intention to provide instruction for the children listed below as provided for by § 22.1-254.1 of the Code of Virginia (1950) as amended, in lieu of having them attend school.

School Year: _____ to _____

NAME(S) OF CHILD(REN)	DATE OF BIRTH	GRADE LEVEL
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I wish to be recognized as eligible to provide home instruction by selecting the option indicated below. (Check One)

- _____ I have a high school diploma or a higher degree. (Attach copy of diploma/degree)
- _____ I have the qualifications prescribed by the Board of Education for a teacher. (Attach a copy of current, valid teaching certificate or statement to this effect from the Virginia Department of Education.)
- _____ I have enrolled the child(ren) in a correspondence course or distance learning program or in any other manner. (Attach notice of acceptance or other evidence of enrollment showing name and address of school and the courses in which each child is enrolled.)
- _____ I have attached to this notice a program of study for the coming year and a statement which states why I am able to provide an adequate education for my child or children.

As prescribed in § 22.1-254.1 of the Code of Virginia, I have enclosed or will provide the school division with a description of the curriculum, limited to a list of subjects to be studied during the coming school year, and evidence of having met one of the above criteria along with this Notice by August 15 of each year. If I begin home instruction after the school year has started, I will submit this Notice as soon as practicable and comply with the other requirements within 30 days of this Notice to the school division.

I understand that by August 1 of next year, I must provide evidence of educational achievement as prescribed in § 22.1-254.1 of the Code of Virginia which defines the requirements for home instruction.

I hereby certify that I am the parent or guardian of the child or children listed above:

Signature: _____ Date: _____

Telephone Number: (Primary) _____ (Alternate) _____

Print or type name and address:

E-Mail Address

**For Hanover County residents, please MAIL original, signed form rather than faxing or submitting electronically to: Ms. Laura Bryant, Coordinator of Student Support Services, Hanover County Public Schools, 200 Berkley Street, Ashland, VA 23005
Telephone Number – (804) 365-4615**