Declaration of Intent to Utilize a Home Study Program

| oth enr | er person(s) residing within the | is state having control or charge oblic school, a private school, or a | of any child(ren) betw home study program | quiring that every parent, guardian, or ween six and sixteen years of age shall a, I hereby give notice to the for the child(ren) named below a home |
|--|--|--|--|---|
| ins | ruction program that meets the following requirements. Parents or guardians may teach only their own children in the home study program, provided the teaching parent or guardian possesses at least a high school diploma or a general educational development (GED) equivalency diploma, but the parents or guardians may employ a tutor who holds a high school diploma or a general educational development diploma to teach | | | |
| 2. | such children; | | _ | |
| language arts, mathematics, social studies, and science; | | | | in includes, but is not ininted to, reading, |
| 3. | The home study program must provide instruction each 12 months to home study students equivalent to 180 school days of education with each school day consisting of at least four and one-half school hours unless the child is physically unable to comply with the rule provided for in this paragraph; | | | |
| 4. | | | | |
| 5. 6. | Students in home study programs shall be subject to an appropriate nationally standardized testing program administered in consultation with a person trained in the administration and interpretation of norm reference tests to evaluate their educational progress at least every three years beginning at the end of the third grade and records of such tests and scores shall be retained but shall not be required to be submitted to public educational authorities; and The home study program instructor shall write an annual progress assessment report which shall include the instructor's individualized assessment of the student's academic progress. Reports shall be retained by the parent(s) or guardian of | | | |
| children in the home study program for a period of at least three years. | | | | 7. . 7. |
| | <u>*Special Ed.</u> | Name of Stude | nt(s) Enrolled | Birth Date of Student(s) |
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| | dicate by placing an "X" next to the n onal. | ame of any student who is identified as or | suspected of needing spec | cial education services. Please note this section is |
| | | dy program is a 12-month period nges or if I discontinue the home | | / I will notify the |
| Signature of Parent/Guardian: | | | Date Subm | nitted: |
| Printed Name of Parent/Guardian: | | | Phone (optional): | |
| Ad | dress: | | | |

A Declaration of Intent must be SUBMITTED TO YOUR LOCAL SCHOOL DISTRICT within 30 days after the establishment of a home study program and by September 1 annually thereafter. You may find contact information for all Georgia school districts at http://www.gadoe.org/findaschool.aspx?contacts=ALL.

(Street Number)

(City/State/Zip)