



Start Date: _____

Mrs. Tamara M. Boyle
Superintendent
School Board of Levy County
480 Marshburn Drive
Bronson, FL 32621

Dear Mrs. Boyle:

It is my intention to establish a home education program for my child/children as follows:

Name(s): _____

Physical Address: _____

City: _____ State FL Zip: _____

Mailing Address (if different than Physical address): _____

City: _____ State FL Zip: _____

Date of Birth: _____

Florida Law requires parents to provide their local School Board with a letter of intent to home educate their child. Completing this form fulfills this requirement. (F.S., 1002. 41)

By completing and submitting this form, parents/guardians agree that they:

- Currently reside at the above-mentioned residential address.
- Understand that an **Annual Evaluation will be due on or before the anniversary date of enrollment into SBLC Home School Education.**
- Understand that the **SBLC Home School Education Department DOES NOT:**
 - o Issue a high school diploma, provide transcripts or grade promote.
 - o Provide books, curriculum, or any instructional materials or resources.

Sincerely,

Signature of Parent / Date

Printed Name of Parent / Date

Providing the information below is optional unless your student will be participating in a school district program or service, such as State Assessments, Dual Enrollment, or on campus classes or programs:

Grade Level: _____ Race: _____ Sex: _____