

Frederick County Public Schools

STUDENTS

**Notice of Intent to Provide Home Instruction**

Student#: \_\_\_\_\_  
DOE#: \_\_\_\_\_

IEP Services: \_\_\_\_\_

**Frederick County Public Schools  
Student Support Services Department  
1415 Amherst Street  
P.O. Box 3508  
Winchester, VA 22601  
540-662-3888**

**NOTICE OF INTENT TO PROVIDE HOME INSTRUCTION**

School Year: \_\_\_\_\_

School Zone: \_\_\_\_\_

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

<u>NAME(S) OF CHILD(REN)</u>	<u>DATE OF BIRTH</u>	<u>AGE</u>	<u>GRADE LEVEL</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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 higher credential (but not a high school equivalency certificate). On file with Frederick County Public Schools? Yes  No  If No, please attach a copy.  
I am including a description of the curriculum I will be following.
- I meet the qualifications for a teacher as prescribed by the Board of Education for a teacher. On file with Frederick County Public Schools? Yes  No  If No, please attach a copy. I am including a description of the curriculum I will be following.
- Provide a program of study or curriculum (list of courses) which may be delivered through a correspondence school or distance learning program.  
Name of correspondence school or distance learning program: \_\_\_\_\_
- I have attached a statement which provides evidence that I am able to provide adequate education for my child(ren) and am including a description of the curriculum I will be following.

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I understand that by August 1 of next year, I must provide evidence of educational achievement as prescribed in Section §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 of Parent/ Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Print or type name and address of parent/guardian

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact:

(home) \_\_\_\_\_

(work) \_\_\_\_\_

(other) \_\_\_\_\_

(e-mail) \_\_\_\_\_

Adopted: June 17, 2020