

NOTIFICATION BY PARENT OR GUARDIAN OF INTENT TO PROVIDE HOME INSTRUCTION

INSTRUCTIONS: Complete this form fully, including your signature, attach a description of the curriculum to be followed for each child for the coming year and any other required supporting documents, and send to: **Home Instruction, Fairfax County School Administration Center, 8115 Gatehouse Road, Suite 4700, Falls Church, VA 22042. Fax: 571-423-4447.**

I hereby certify that I am the parent or guardian of the child or children listed below, that I intend to teach the child or children at home during the coming school year in lieu of school attendance in accordance with §22.1-254.1 of the Code of Virginia, and that the information I am providing is true and correct to the best of my knowledge and belief.

Name of Child or Children (last, first, middle)	Date of Birth (month, day, year)	Grade Level for the ___-___ School Year	FCPS Base School
1.			
2.			
3.			
4.			

I hereby certify that I am eligible to provide home instruction under Virginia law because (CHECK ONLY ONE):

- _____ I hold a high school diploma. (ATTACH A COPY OF ONE OF THE FOLLOWING: HIGH SCHOOL DIPLOMA; TRANSCRIPT FROM THE HIGH SCHOOL; OR EVIDENCE OF A COLLEGE DEGREE **AND** A DESCRIPTION OF THE CURRICULUM TO BE FOLLOWED DURING THE COMING YEAR FOR EACH CHILD.)
- _____ I have the qualifications prescribed by the Virginia Board of Education for a teacher. (ATTACH A COPY OF YOUR CURRENTLY VALID VIRGINIA TEACHING CERTIFICATE OR A STATEMENT OF ELIGIBILITY FROM THE VIRGINIA DEPARTMENT OF EDUCATION **AND** A DESCRIPTION OF THE CURRICULUM TO BE FOLLOWED DURING THE COMING YEAR FOR EACH CHILD.)
- _____ I have enrolled the child or children in a correspondence course approved by the Virginia superintendent of public instruction. (ATTACH PROOF OF ENROLLMENT FROM THE INSTITUTION SHOWING THE SCHOOL'S NAME AND ADDRESS AND, FOR EACH CHILD: THE CHILD'S NAME, THE TERM(S) FOR WHICH ENROLLED, AND THE COURSE(S) IN WHICH ENROLLED.)
- _____ I have attached to this notice a program of study and/or curriculum for the coming year that includes the state Standards of Learning objectives for language arts and mathematics or documentation that provides evidence that I am able to provide an adequate education for my child or children.

Upon request of the Division Superintendent, I will submit documentary proof of immunizations, medical contraindication certified by a licensed physician, or affidavit attesting that the administration of immunizing agents conflicts with our religious tenets or practices.

I understand that if I conduct home instruction, I must provide the Division Superintendent by August 1 of next year with either (a) evidence that the child or children have attained a composite score in or above the fourth stanine on any nationally normed standardized achievement test or (b) an evaluation or assessment that the Division Superintendent determines to indicate that the child is achieving an adequate level of educational growth and progress. I also understand that if the required evidence of progress is not provided by me, Virginia law provides for a one-year probationary period. Parents or guardians shall file, with the Division Superintendent, evidence of their ability to provide an adequate education for their child or children and a remediation plan that indicates that their program is designed to address any educational deficiency.

(PRINT OR TYPE) Parent's or Guardian's Name

Parent's or Guardian's Signature

Number and Street

Date

City State ZIP Code

H_____W_____
Telephone