

**The School District of Charlotte County
Home Education Notification of Intent**

In compliance with section 1002.41(1)(a), Florida Statutes, this is written notice from the parent/guardian to establish and maintain a Home Education Program for the following child(ren). **The parent/guardian is responsible for maintaining a complete portfolio and learning log as well as submitting results of annual evaluations** in compliance with section 1002.41, Florida Statutes.
For additional information contact the Home Education Office at (941) 255-7507.

Name(s) of Child(ren)	Male/Female	Date(s) of Birth	Current Grade	Last School Attended

I UNDERSTAND I AM WITHDRAWING MY CHILD FROM CHARLOTTE COUNTY PUBLIC SCHOOLS AND ENTERING INTO PARENT DIRECTED EDUCATION THAT WILL NOT LEAD TO A HIGH SCHOOL DIPLOMA.

Parent/Guardian Name _____ Telephone _____
 Home Address _____ City/Zip _____
 E-Mail Address _____

 Signature of Parent/Guardian Date

MAIL OR EMAIL TO:

The School District of Charlotte County
 Home Education Office
 18300 Cochran Blvd.
 Port Charlotte, FL 33948

EMAIL: Leanne.Fahey@yourcharlotteschools.net