

COMPULSORY EDUCATION EXEMPTION CERTIFICATE FOR HOME INSTRUCTION

Student(s) #	Student Name(s)	Grade	M/F	Birth Date(s)	New/Renew	should your a	l student (s) l attend in nrea Boundary)	student may	ny classes or activities your participate in at the local he principal's permission
Address:		City:					Zip:		Home Phone:
Parent/Guard	lian:	Address	s (if d	ifferent than st	udent	:):	E-mail (o _l	ptional)	Work Phone:
Reason for Ho	ome Schooling (optional):								
 To pro I am s I am s I am s I f my 	ovide instruction in the subjects the ovide instruction for 180 days and 9 olely responsible for selecting instruction for selecting instruction for setting the time of the selecting or other student is home schooled, he/she may be consibility for my student(s) and under the selection of the se	990 hours each uctional mate ae, place and a crwise evaluate ay only earn	n year rials a netho ring th schoo	and textbooks. If of instruction, the home school is a district credit of the school in the school is a district credit of the school is a district credit	nstruc	ction my tent with	student reco	eives. rict policies.	ne Alpine School District or
ree and appropried and services	th IEPs or identified through child riate public education and I underst he/she would receive if enrolled in A-11-102.5 and Utah State Board o	and and agree a public scho	that i	my student has n Alpine School D	o ind	ividual 1	right to recei	ve some or all	of the special education and
have read this	agreement and understand my oblig	gations as a ho	ome s	chool parent.					
TO BE SIGNE	D BEFORE A NOTARY:								
Parent/Guardian	Signature:						Date:		
Subscribed and	I sworn to before me this da	ny of			, 20_				
Notary Public_									
My Commissio	n expires:								
Residing at:									

Once notarized please submit form to: Alpine School District Attn: Student Support Services 575 North 100 East American Fork, Utah 84003

Or to your ASD boundary school

DISTRICT EXEMPTION CERTIFICATE FOR HOME SCHOOL INSTRUCTION

AUTOUR MEDICALITATION SAMUEL ATTICAVIT	from compulsory attendance for the $2011-2012$ school year based upon the	
parent's/guardian's signed Affidavit.		
THIS EXEMPTION EXPIRES: <u>JU</u>	UNE 30, 2012	
District Signature:	Date:	
Etion is involid without name	-t/li signatura AND District signatura	
	nt/guardian signature AND District signature.	
Note: The school/school district has r	no obligation to review a home schooled student's work or curriculum for credit.	
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