TO:	Superintendent of S	Superintendent of Schools		
FROM:	Name:			
	Address:			
	Phone:			
RE:	NOTICE OF INTENT TO EDUCATE A CHILD AT HOME – <u>UNASSISTE</u>			
•		intent to educate my/our child(name(s) and date(s) of birth of t	` '	
home is/are		iame(s) and date(s) of offin of t	ne chind(ten) to be educated at	
Name of Child		Date of Birth	Grade Level	
	<del>-</del>			
I/we have r		ve read Board of Education Poli	cy No. 6172.3 regarding home	
Parent/Guardian		Date	Date	
Parent/Guardian		Date	Date	
	dge and accept full resp quirements of state law	ponsibility for the education of	my child(ren) in accordance	
Parent/Guardian		Date	Date	
I only ackn planned pro		form and render no opinion as	to the appropriateness of the	
Superintendent		Date		