

Home School Evaluation Checklist

Student Name: _____

Date of Birth: _____ Grade: _____

Parent/Guardian: _____

Telephone: _____

Address: _____

City: _____ State: _____ Zip: _____

*****EVALUATIONS MUST BE COMPLETED YEARLY. MUST RECEIVE BY JULY 1ST.**

Please check the option which satisfies the annual evaluation required in Statute 1002.41 (1) (c) and send this Evaluation Checklist, ***with a copy of the Evaluation or test results***, to Liberty County School District, 11051 NW SR 20, Bristol, Florida, 32321, attention *Mandie Fowler or Tammy Pullam*.

A.	Portfolio evaluated by a Florida Certificated teacher. Attach a copy of the signed evaluation.
B.	Results of a nationally normed achievement test taken by the student such as SAT10 Attach a copy of the test results
C.	Results of a State Student Assessment Test Such as FSA or FAIR Attach a copy of the test results
D.	Student evaluated by an individual holding a valid active license pursuant to the provision of s. 490.003(7) (8). Attach a copy of the signed evaluation.
E.	Other valid measurement tool as mutually agreed upon by the Superintendent and the parent. Attach a copy of the results