

**STERLING PUBLIC SCHOOLS
NOTICE OF INTENT**

INSTRUCTION OF STUDENT AT HOME

NAME OF STUDENT: _____ DATE OF BIRTH: _____

ADDRESS: _____

NAME OF PARENT(S): _____ TELEPHONE # _____

NAME OF TEACHER: _____ TELEPHONE# _____

ADDRESS: _____

FORM COMPLETED BY: _____

THE SUBJECTS TO BE TAUGHT ARE: (Please check one for each subject)

(REQUIRED) YES NO

Reading

Writing

Spelling

English Grammar

Geography

Arithmetic

U.S. History

Citizenship

(Including a student of town, state,
and federal governments)

(RECOMMENDED) YES NO

Science

Phonics

Penmanship

(OTHER)

Total number of days scheduled for instruction _____

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Teacher's methods of assessment of student progress:

An annual portfolio review will be held during the fourth marking period.

I acknowledge and accept full responsibility for the education of my child in accordance with the requirements of state law.

Parent(s) Signature _____ Date _____

I only acknowledge receipt of this form and render no opinion as to the appropriateness of the planned program.

Superintendent's Signature _____ Date _____