

Baltimore County Public Schools

ANNUAL HOME SCHOOLING VERIFICATION FORM

2009-2010

This form is to be used **ONLY** for those students residing in Baltimore County who had participated in a home schooling program for the previous academic year. **You may provide this information in person, by telephone, or by mail.** (You should request a Home Schooling Notification Form for all new students.) **If you are under an umbrella, this form is optional.**

1. Name of Parent/Guardian: _____
 Street Address: _____
 City: _____ Zip: _____
- (Alternate optional method of contact)*
 Home Phone # _____ Work Phone # _____
 Cell Phone # _____ Email _____

2. Complete the following for **each** child who was enrolled in Home Schooling last year. Please indicate the grade level for the 2009-2010 school year.

Legal Last Name of Student	Legal First Name of Student	Male	Female	Date of Birth Month/Year	Grade entering 2009-2010

3. Will you continue to home school those students listed above for the 2009-2010 academic year? Yes No
(Optional) If yes, name the Home Schooling curriculum you will be using. _____
4. Are you registered with an umbrella group? If yes, name the umbrella program. _____
5. If you are continuing to home school, do you want your child/children to participate in the standardized testing program?
 Yes No (Check our website for testing information.)
 If your child has an active IEP/504 plan, testing accommodations will be made. The parent should give a copy of the IEP/504 plan to school personnel prior to testing.
6. *(Optional)* If you are not planning to continue to home school your child/children, what educational plans have you made?

Parent/Guardian Signature: _____ **Date:** ____/____/2009

Please return this form to:

Home Schooling Specialist
 Baltimore County Public Schools
 9610 Pulaski Park Drive, Suite 219
 Baltimore, MD 21220