

## **Bradford County School District**

Dr. Rob Charles, Coordinator Home Education

501 W. Washington Street • Starke, FL 32091 • 904.966.6021

## NOTICE OF INTENT TO ESTABLISH A HOME EDUCATION PROGRAM

In compliance with section 1002.41(1)(a), Florida Statutes, this serves as written notice to establish and maintain a Home Education Program for the following student(s):

| Effective date of your student's h                       | ome education program:    |  |
|--|---------------------------|--|
| •  | (mm/dd/yyyy)              |  |
| Child(ren)'s Name:                                       | Date of Birth:            |  |
|  |                           |  |
|  |                           |  |
|  |                           |  |
| Home Address:  |                           |  |
|  |                           |  |
|  |                           |  |
|  |                           |  |
| Parent Signature   | Date                      |  |
| Received by:   | Date:                     |  |
| Mail/Fax/Email to:                                       |                           |  |
| Bradford County School District 501 W. Washington Street | Home Education Department |  |
| Starke, FL 32091   |                           |  |

(904) 966-6021 Fax: (904) 966-6818

Email: davis.mercedo@mybradford.us

\*\*\*This form is provided for the parent/guardian's convenience and is optional. A written letter may be used in its place\*\*\*