



Letter of Termination of Home Education Program

(Please print clearly in blue or black ink.)



Dear Superintendent:

It is my intention to no longer home educate the following child(ren). The date of termination is

_____.

<u>Student Name(s)</u>	<u>Birthdate</u>	<u>School Name (if returning to school)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The reason is (check one):

_____ The child has been or will be enrolled in a public, parochial, or private school.

_____ The child has reached age sixteen (16), and is no longer of compulsory school age.

_____ The child will no longer reside in Hillsborough County, Florida. The new residence will

be in _____

City

State

_____ Other: _____

*Home Education Parent's Signature (Electronic **not** accepted.)*

Date

Address: _____

Scan and email forms to return:

Home.education@hcps.net

Or, Fax:

FAX (813) 609-6825

Or, Mail:

Home Education
2704 N. Highland Ave
Room 309
Tampa, Florida 33602