



BAY DISTRICT SCHOOLS
Division of Teaching and Learning
Student Services

INTENT TO TERMINATE HOME SCHOOL ENROLLMENT

Dear Superintendent:

I am terminating my child's Home School enrollment in Bay County, Florida. I will enroll my student immediately in a public, private, or virtual school in accordance with Florida Statute 1003.21.

Student Name _____ Date of Birth _____

Termination Date _____ Current Grade _____

Check the reason for termination of Home School below (only one):

_____ My child has been or will be enrolled in _____.

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

_____ My child will no longer reside in Bay County, Florida.

_____ Other: _____

Parent/Legal Guardian Signature

Date

Return to: Division of Teaching and Learning
Student Services
Attn: Deborah Howell
howeldl@bay.k12.fl.us