

Ledyard Public Schools

**NOTICE OF INTENT
INSTRUCTION OF STUDENT AT HOME**

As parent/legal guardian, I, _____ formally request to withdraw my
(Name of parent/legal guardian)

student, _____, from Ledyard Public Schools to home school as of
(Name of student)

_____. Their home school program will start on _____. The following
(Date of withdrawal) (Date of program start)

areas will be taught by _____:
(Name of instructor)

YES NO

REQUIRED in the state of Connecticut:

ENGLISH GRAMMAR		
READING		
SPELLING		
WRITING		
MATHEMATICS		
GEOGRAPHY		
U.S. HISTORY		
CITIZENSHIP: Including a study of Town, State and Federal Governments		

RECOMMENDED:

SCIENCE		
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OTHER:

Total number of school days scheduled for home instruction: _____

Instructor's methods of assessment of student progress: _____

Annual Portfolio Review

An optional annual portfolio review will be held with the Principal or Assistant Principal at the end of each academic school year. During this review you will have the option to receive constructive feedback about your child's home instruction program and progress. If you wish to participate in this portfolio review you will be contacted by the Secretary of the school your child would attend toward the end of the academic school year. Please select your preferred method of contact below.

Yes, please contact me via Mail Email Phone

No, do not contact me for an annual portfolio review

Please continue to page 2.

Ledyard Public Schools

Please complete the following information in its entirety:

Student date of birth: _____ Current Grade: _____

Current Mailing Address: _____

Parent/Guardian Name(s): _____

Phone number(s): _____

Email address(s): _____

Preferred method of annual correspondence: Mail Email Phone

Would you like to receive a copy of this completed notice of intent mailed home to you for record?

Yes No

Ledyard Public Schools Student Services Department will reach out to you annually before the start of each academic school year to verify your contact information is up to date. If you do not select a preferred method of contact, the annual correspondence will be sent to the mailing address on file. If for any reason you need to update your information or if you intend to move out of district during the time your student is being homeschooled please contact our Student Services Department at 860-464-9255 X1200.

If your child is currently eligible for an Individualized Education Plan (IEP), a 504 Accommodation plan, or other services provided by Ledyard Public Schools, these services will not be provided by the district while he/she is being homeschooled. Should you re-enroll your child into Ledyard Public Schools, a Planning and Placement Team Meeting (PPT), 504 Accommodation meeting or team meeting will be scheduled.

I ACKNOWLEDGE AND ACCEPT FULL RESPONSIBILITY FOR THE EDUCATION OF MY CHILD IN ACCORDANCE WITH THE REQUIREMENTS OF STATE LAW.

PARENT/LEGAL GUARDIAN

DATE

I ONLY ACKNOWLEDGE RECEIPT OF THIS FORM AND RENDER NO OPINION AS TO THE APPROPRIATENESS OF THE PLANNED PROGRAM.

SUPERINTENDENT

DATE

The completed form should be returned to Mr. Jason Hartling, Superintendent of Schools, 4 Blonders Blvd., Ledyard, CT 06339