

Parent/Guardian:

We understand your child will be participating in a home school educational program. We request that you submit a home school declaration within 30 days of the start of home schooling. We request a home school declaration form to be completed at the beginning of each school year thereafter. This is recommended in order to minimize unnecessary investigations of truancy.

A home school student is a school-aged child who resides in the district; who has not received a diploma; whose parents or guardians filed a written declaration (as provided in Section 167.042, RSMo) indicating they are being home schooled; and, who does not attend a public, private, or parochial school.

Please fill out the attached form. Please return it to the building secretary of the elementary/middle/high school (where child would attend). A copy will be kept on file and the original will be forwarded to the District Diagnostic, Attn: Holly Hudson



HOME SCHOOL DECLARATION 2024-2025

Student Name:	Age:_	Date of	Birth:	
Student Name:(Fox)Sc	shool child would attend	if not being ho	me schoo	led:
Name of Program:				
Home School				
Address:	Cit	y	_State	Zip
Phone#Name	of Teacher:			
Did Child have an IEP:	Do you wish	to continue ser	vices?	
Parent Name: (please print)_				
Parent				
Signature:	D	ate:	_Phone:_	
Address	City	St	ate	Zip
No, my child will no lo If your child is no longer being l Student Name:	Age:	ise the status of Date of	gram schooling. Birth:	
Name of School: City:				
Graduated from:		Date:		
Withdrew/Dropped out:		Date:		
Parent Name: (please print)				
Address:		City:		
State:	Zip:			
Parent Signature:	Date:	P	none:	