UINTAH SCHOOL DISTRICT OFFICE OF EDUCATION AFFIDAVIT FOR HOME SCHOOL INSTRUCTION (For Students Ages 6-18)

Student # (District School Info)	Student Name(s)	Birth Date	New/Renew (District School Info)	School Student(s) Should Attend in Your Area (If Known)	Please list any classes or activities your student may participate in at the local school with the principal's permission (optional)
Address:		City:		Zip:	Home Phone (optional):
Parent/Guardian:		Address (If different than student):		Email (optional):	Work Phone (optional):
Reason for Home Sci	hooling (optional):	L			
student(s), exce 53A-11-102.5.	PAREN' affidavit, the parent/guardia tept to the extent the school-a The parent/guardian is solel time, place and method of in	age minor is ly responsib	sole resp dual enr le for the	onsibility for the educatio colled in a public school un e selection of instructional	nder Section materials and
Individ	ild(ren) (Names)ave a disability which could duals with Disabilities Educ rther information.	qualify himation Act (I	h/her for DEA), 20	state or federal service co. 0 U.S.C. 1401 et. seq. Plea	nsistent with the ase contact me
Has an home s educati	ild(ren) (Names) Individual Education Plan (chool does not imply that the on. I understand that my chairs dual enrolled under Section	ne public sch ild(ren) will	nool has no longe	not offered a free and apprer receive services under t	ropriate public he IEP unless

rule R277-438.

UINTAH SCHOOL DISTRICT OFFICE OF EDUCATION AFFIDAVIT FOR HOME SCHOOL INSTRUCTION (For Students Ages 6-18)

•	parent(s) expressly prohing directory information		ny and all information conta S.C. 1232g(a)(5)(A).	ined in this		
I,	, certify tl	, certify that I have not been convicted of child abuse Initial				
TO BE SIGNED	BEFORE A NOTARY	<u>7</u>				
	Signature	of Parent or Guardis	an			
Date	Signature	of Fatent of Guardia	ui			
Subscribed and s	worn before me this	day of	, 20	·,		
			before me, did affirm that t			
same.	te, signed the foregoing (document and acknow	wledged to me that she/he e	xecuted the		
			ry Public for the State of Ut	ah		