

AFFIDAVIT OF INTENT TO HOME SCHOOL

STUDENT INFORMATION

Last Name: _____ First Name: _____ Middle Name: _____
Date of Birth: _____ Grade: _____ Home Phone: _____ Cell: _____
Address: (Mailing) _____ (Physical) _____ City, AZ. Zip: _____
The above named child is attending (check one) _____ Home School or _____ a regularly organized private school
Name of school the child is attending: _____ Current address of the school the child is attending: _____
School Year: _____ PUBLIC SCHOOL DISTRICT OF RESIDENCE: _____

PARENT/GUARDIAN INFORMATION

Last Name: _____ First Name: _____ Middle Name: _____
Last Name: _____ First Name: _____ Middle Name: _____

READ AND INITIAL NEXT TO EACH STATEMENT

- _____ I understand that an Affidavit of Intent shall be filed within thirty days from the time the child begins to attend a private school or home school and is not required thereafter unless the private school the home school instruction is terminated and then resumed.
- _____ I understand a certified copy of the child's birth certificate or other reliable proof of the child's identity and age according to ARS §15-828 shall also be filed in the County School Superintendent's Office.
- _____ The person who has custody of the child shall notify the county school superintendent within thirty days of the termination that the child is no longer being instructed at private school or a home school. If the private school or home school instruction is resumed, the person who has custody of the child shall file another Affidavit of Intent with the county school superintendent within thirty days, ARS §15-802, subsection C.
- _____ I understand the child must be instructed in at least the subjects of reading, grammar, mathematics, social studies and science.
- _____ I understand that testing of children who are instructed in a home school program while they are receiving home school instruction is not required. I understand that if the child is instructed at home and resided within the attendance area of a school, participation in interscholastic athlete competition may be possible. The State Board of Education may require the child to take a nationally norm-referenced achievement test or academic evaluation for verification of academic performance according to ARS § 15-802, subsection A.
- _____ I understand that child who enrolls in a kindergarten program or grades one through twelve after receiving instruction in a home school program shall be tested pursuant to ARS § 15-745 in order to determine the appropriate grade level for the educational placement of the child.

Under penalty of law, I attest the information provided on this form is true to the best of my knowledge _____

Parent/Guardian Signature

State of _____ County of _____

Subscribed and sworn to before me this _____ day of _____, 20 _____

SIGNATURE OF NOTARY PUBLIC

My Commission Expires: _____ (Seal)

OFFICE USE: Original – County School Superintendent;
copies: School District, Parent/Legal Guardian

Return completed form to:
Apache County Superintendent of Schools
PO Box 548
75 N. First West
St. Johns, AZ 85936
Questions Call: (928) 337-7539

Recorded in Apache County

Apache County Superintendent of Schools

Date _____ By _____