

Home School Office 2540 LaPorte Avenue Fort Collins, CO 80521

Home-School Education Annual Notification

(Please print or type.)

Written notification must be received by Poudre School District each year at least 14 days prior to the establishment of a home-based education program.

1.	School year:						
2.	Student's legal name:						
	First		Middle	Last			
3.	Student's place of residence/address:			Mailing address	Mailing address (if different):		
				_			
	Street Address			Address			
	City Sta	te ZIF	² Code	- City	State	ZIP Code	
4.	Phone number (optional):						
_	D 0 3 11						
5.	Parent's email address:						
6. Annual number of instructional hours provided (Instructional contact hours r						erage	
	4 hours per day for 172 days):						
7	Student's age.						
7.	Student's age:						
8.	Grade level:						
0	Location of test/evaluation results (in a testing year):						
9.	· · · · · · · · · · · · · · · · · · ·						
	PSD Home School Office:						
	Independent/parochial school:						
10							
10.	Last private/public school attended:						
11.	It is helpful for us to know if your student is taking classes (optional)						
	At a PSD school?	Yes	No				
	If Yes, name of PSD school:						
	Through an online school?	Yes	No				
	If Yes, name of PSD school:						
12.	Parent/Guardian's name:						
Email form to: psdaso@psdschools.org -or- Return this form to: Home School Office							

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