File Code: 5100

MILLARD COUNTY SCHOOL DISTRICT AFFIDAVIT FOR HOME SCHOOL INSTRUCTION

(For Students Ages 6-18)

Student Name(s)		Birth Date	School Student Would Attend Gra		Grade
Address:	City:		Zip:	Phone #:	
Parent/Guardian:	Address		I		
E-mail:		Reason for Home Schooling:			
******* <u>P</u>	ARENT/GUARD	IAN AFFIDAVI	<u> </u>	* * * * * * * * * * * * * *	****
By signing this affidavit, the parent/guard	dian understand	ds and certifies	s:		
 I am solely responsible for the edual enrolled in a public school u I am solely responsible for the se I am solely responsible for the tin I am solely responsible for the ev I understand that my student(s) v diploma. 	nder Section 5 lection of instrune, place, and leading the section of the section	3G-6-202. uctional materi method of inst home school	ials and textbo ruction. instruction.	oks.	
My child(ren) (Names) may have a disability which could qu Disabilities Education Act (IDEA), 20					als with
☐ My child(ren) (Names) has an Individual Education Plan (IE	P) under IDEA,	20 U.S.C. 1401	et. seq.		
**************************************	ABUSER EDUC	ATION RESTR	ICTIONS* * * * *	*****	* * * * *
Utah Law 53G-6-204 prohibits any indivirequired school attendance.	dual who has o	committed child	d abuse from e	exempting their child	l from
I hereby certify that I have not be our residence).	en convicted o	f child abuse (nor has anyon	e else currently stay	ing at
******** <u>TC</u>	BE SIGNED B	EFORE A NOT	<u>ARY</u> ******	* * * * * * * * * * * * * * * *	*****
By signing this affidavit, I expressly prohincluding directory information as defined			information co	ontained in this docu	ıment,
Signature of Parent or Guardian				Date	
Subscribed and sworn before me this	day of		, 20		
Notary Public					
My commission expires:					