Mounds View
PUBLIC SCHOOLS

HOME SCHOOL DISCONTINUATION

Please complete and return this form if you will not be homeschooling your student(s). (It is our responsibility to verify that all students living in the Mounds View School District are being educated. Thank you for your cooperation.)

Parent Name _____

Address: _____

_____

Contact Phone: _____

No longer home schooling as of the following date: _____

Reason:

_____ We have moved out of the Mounds View School District

_____ We have made other educational arrangements for our students

Student Name(s)	Grade	Will attending the following school:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I verify that the above information is accurate.

_____ _____

Parent Signature Date