

**BERLIN PUBLIC SCHOOLS
BERLIN, CONNECTICUT**

NOTICE OF INTENT: INSTRUCTION OF STUDENT(S) AT HOME

Current School: _____ School Year: _____

STUDENT INFORMATION

Student Name (please list each student)	Date of Birth	Grade
1.		
2.		
3.		

PARENT/GUARDIAN INFORMATION

Parent/Guardian Name:	Address:
Phone Number:	Date Home Instruction Will Begin:

TEACHER / INSTRUCTOR INFORMATION

Teacher/Instructor Name:	Address:
Phone Number:	

SUBJECTS TO BE TAUGHT

REQUIRED SUBJECTS	RECOMMENDED SUBJECTS
☐ Reading	☐ Science
☐ Writing	☐ Other:
☐ Spelling	
☐ English Grammar	
☐ Geography	
☐ Arithmetic	
☐ U.S. History	
☐ Citizenship (including study of town, state, and federal governments)	

INSTRUCTION PLAN

Total Number of Days of Instruction:	
Teacher's Method of Assessing Student Progress:	

PARENT/GUARDIAN ACKNOWLEDGMENT

I acknowledge and accept full responsibility for the education of my child(ren) in accordance with the requirements of state law (Connecticut General Statutes 10-184 and 10-220 & PA26-37).

Parent/Guardian Signature:	Date:
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RECEIPT ACKNOWLEDGMENT — SCHOOL USE

I acknowledge receipt of this form.

Assistant Superintendent Signature:	Date:
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Please return the completed form to Berlin Public Schools.