



## Notice of Intent to Pursue a Program of Home Education

*Instructions:* Please complete this form, attach any additional information and forward it to the Assistant Superintendent of Schools prior to the starting date of the home education program. If the process is initiated during the school year, the student must remain in school until the school district and the parents agree jointly to the home education plan.

*Mailing Address:*  
Braintree Public Schools  
Jim Lee, Assistant Superintendent of Schools  
348 Pond Street  
Braintree, MA 02184

*Email Address:*  
jim.lee@braintreeschools.org

Academic Year: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

1.	Student Name: _____
	Birth Date: _____ Grade Level: _____
2.	Student Name: _____
	Birth Date: _____ Grade Level: _____
3.	Student Name: _____
	Birth Date: _____ Grade Level: _____
4.	Student Name: _____
	Birth Date: _____ Grade Level: _____

On a separate sheet, provide the following information regarding the home education program.

- Describe the instruction program/curriculum to be taught, including subjects and instructional aids/materials to be used. Include sample lesson plans.
- Describe the academic background, life experiences and/or qualifications of those who will be instructing the child(ren), as they relate to the instructional program.
- Describe the method of assessment to be used, including any standardized testing.
- State the hours of instruction, by subject, commensurate with public school.
- Upon approval of the home education program, it is expected that a portfolio of the student's work be submitted to the Office of the Assistant Superintendent annually in June.

**The signature of the school official indicates final approval of this plan. A parent/administrative conference may be scheduled.**

\_\_\_\_\_  
Assistant Superintendent of Schools

\_\_\_\_\_  
Date