

Home Instruction (Home Schooling) Notification Form

Department of Student Services
Home Instruction Office
191 South East Street
Frederick MD 21701
PHONE: 240-586-8755
FAX: 301-644-5246

EMAIL: homeinstruction@fcps.org

Frederick County Public Schools 191 South East Street

Form #064-F02E September 2024

Clear Form 191 South East Street
Frederick, Maryland 21701

This form must be completed by the parer to starting home instruction.	nt or legal guardi	an and sen	it to the	e Home	Instruction Office prior	
	Date Home Schoolin	ome Schooling Will Begin (MM/DD/YYYY): / /				
Student Name (Last, First, Middle Initial)	Date of Birth	Gender M F	Race	Grade Level	FCPS School Student Would Be Attending	
		MIF				
		MIF				
		MIF				
		MIF				
Parent/Guardian: (Last, First, Middle Initial)			Email address			
Mr. / Mrs. / Ms.						
Street Address / City		Zip			Phone	
PART B: COMAR Regulations & Standardized Testing						
1. I hereby CERTIFY that I have read and understand the requirements in <u>COMAR Regulation</u> .						
2. I want my child/children to participate in the standardized testing program. I will contact my districted school no later than two weeks prior to testing. The test dates are advertised in August on www.fcps.org under Calendar . My child/ children will test following the school's testing schedule and in their age-appropriate grade level.						
PART C: Program Supervision: Parents/Guardians Must Select Either 'A' or 'B'						
OPTION A: FCPS Monitoring I hereby AGREE that I will comply with CON demonstrates that regular, thorough instr system's personnel during the year at a m	uction is being provi	ded. The po	rtfolio wi	ll be revie		
OPTION B: Supervision by a MSDE Re will enroll their child/children in a progran choose from the link above will provide ver conduct portfolio reviews for parents tead	n from the Registered rification of enrollme	d Nonpublic I ent to FCPS He	Entities li	ink above	. The program you	
Provide Name of Nonpublic Entity you chose						
from link/list above: HCHC Leadership Academy: 9091 Snowden River Pkwy #1017 Co				1017 Co	T	
Parent/Guardian Signature:				Date:		