Please fill out this form and return to Stacey Vazquez, Director of Student Support Services, SAU #34, 78 School Street, Hillsboro, NH 03244

Intent to Provide Home Education Program

In accordance with New Hampshire RSA 193-A:5 and Administrative Rules Ed 315.04, this letter serves to notify you of the intent to home educate our child(ren), beginning onfor the 20 20 school year.		
Child's Name	Date of Birth	Grade
Child's Name	Date of Birth	Grade
Child's Name	Date of Birth	Grade
law. All information provided information requires written my/our rights under the Unite Parent/Legal Guardian In	se of any information contained in this notice excel herein is considered privileged and confidential parental consent prior to such disclosure. By this ed States and/or New Hampshire Constitution as a	Any further disclosure of this s notice, I/we are not waiving amended.
Name of parent/legal guardia	n:	
Mailing Address:		
Email address:		
Phone Number:		
Signature	Signature	