

East Haddam Public Schools

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NOTICE OF INTENT INSTRUCTION OF STUDENT AT HOME

Name of Student: _____

Date of Birth: _____

Address: _____

Telephone #: _____

Name of Parent/Guardian: _____

Telephone #: _____

Name of Parent/Guardian: _____

Telephone #: _____

Address, if different from student: _____

I acknowledge and accept full responsibility for the education of my child in accordance with the requirements of state law.

Parent

Date

Parent

Date