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## Westford Public Schools

Administrative Offices

23 Depot St. • Westford, Massachusetts 01886

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

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

**Instructions:** Please complete this form, attach the additional information requested, and forward it to the Curriculum Office prior to starting the home education program.

#### 1. Parent/Guardian Info:

Name of Parent/Guardian(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### 2. First, Middle, Last Name of Each Child:

Name \_\_\_\_\_ DOB \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_ Grade \_\_\_\_\_

#### 3. On a separate sheet, provide:

- Subjects that the student will study;
  - Hours of instruction for each subject;
  - Length of the home school year;
  - Textbooks, workbooks, and other instructional aides to be used by the student;
  - Lesson plans and teaching manuals to be used by the parent;
  - Means to be used to assess the student;
  - Academic credentials or other qualifications of each person who will be instructing the student;
- If this is the first year you are requesting home schooling in Westford, you must also provide:
- At least 2 forms of proof of residency (e.g. driver's license, recent household utility bill, bank statement).

**4. If you are no longer home schooling your child(ren), please indicate that by listing the school(s) in which your child(ren) is enrolled (otherwise, leave blank):**

School: \_\_\_\_\_ Town/State: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent of Guardian

\_\_\_\_\_  
Date submitted

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**SHAPING THE FUTURE ONE CHILD AT A TIME**