

Declaration of Intent to Provide Home-Based Instruction
 Rochester School District, 10140 Hwy 12 SW, Rochester WA 98579

A parent who intends to cause his/her child or children to receive home-based instruction in lieu of attendance or enrollment in a public school, approved private school, or an extension program of an approved private school must file an annual declaration of intent to do so in the format prescribed below:

I do hereby declare that I am the parent, guardian, or legal custodian of the child(ren) listed below; that said child(ren) is (are) between the ages of 8 and 18 and as such are subject to the requirements found in chapter 28A.225 RCW Compulsory Attendance; I intend to cause said child(ren) to receive home-based instruction as specified in RCW 28A.225.010(4); and if a certificated person will be supervising the instruction, I have indicated this by checking the appropriate space.

Children's Names	Birthdate and Grade	Part time attendance or services <i>(Fill out back of form)</i>	Running Start <i>(Fill out back of form)</i>

() The home-based instruction will be supervised by a person certificated in Washington State pursuant to chapter 28A.410 RCW.

 Signature of Parent/Guardian _____
Date

 Street Address _____
City _____
State _____
Zipcode

This statement must be filed annually by September 15 or within two weeks of the beginning of any public school quarter, trimester, or semester with the superintendent of the public school district within which the parent resides.

OFFICIAL USE ONLY BELOW THIS LINE

Date Received: _____ Name of District Official: _____

Signature of District Official: _____ Date: _____

Rochester School District
Request for Participation in Running Start, Part-Time Attendance or
Ancillary Services from a Student Receiving Home-Based Instruction

Running Start **Name of College:** _____

Name of student: _____ Grade: _____

Signature of Parent/Guardian: _____ Date: _____

Telephone: (Work No.) _____ (Home No.) _____

Participation in Running Start requires registration in your resident school district.

Please contact Rochester School District for additional paperwork.

Service or course at RSD requested and date(s) student wants to participate:

Name of Student(s): _____

Service/course: _____ Date: _____

Service/course: _____ Date: _____

Service/course: _____ Date: _____

Service/course: _____ Date: _____

Signature of School Counselor: _____ Date: _____

Signature of parent or guardian: _____ Date: _____

IF REQUEST IS MADE FOR STUDENT TO ONLY ATTEND HOMESCHOOL FOR ONE COURSE:

Name of student: _____

Course(s) being homeschooled _____

Signature of School Counselor: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____

Return to: Rochester School District
Attn: Home-based Instruction
10140 Hwy 12 SW
Rochester, WA 98579