

NOTICE OF INTENT
INSTRUCTION OF STUDENT AT HOME
Pomfret Community School
Office of the Superintendent

Name of Student: _____
Date of Birth: _____
Address: _____
Telephone number: _____

Name of Teacher: _____

Teacher's Telephone Number: _____

Subjects to be taught are: (Please Check off)

(Required)
Reading
Writing
Spelling
English Grammar
Geography
Arithmetic
U.S. History
Citizenship (including a study of town, state, and federal governments)

(Recommended)
Science
Other

Total number of days scheduled for instruction: _____

Teacher's method of assessment of student progress: _____

An annual portfolio review will be held on or about: _____

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

Parent's Name _____

Date _____

I only acknowledge receipt of this form and render no opinion as to the appropriateness of the planned program.

Superintendent's Name _____

Date _____