

# INTENT TO PROVIDE HOME INSTRUCTION

FORM 410C REVISED 7/16/2019



ROANE COUNTY  
SCHOOLS

This form should be completed each time a parent or guardian intends to provide home instruction for a student. A separate form should be completed for each student to be provided home instruction.

**NEW INTENT** (student is currently enrolled in public/private school or new to Roane County)

**RENEWAL OF INTENT** (previous intent must be on file)

## STUDENT INFORMATION

**STUDENT'S FULL LEGAL NAME** \_\_\_\_\_

**WVEIS ID (IF KNOWN)**

**STUDENT'S MAILING ADDRESS** \_\_\_\_\_

**DATE OF BIRTH**  /  / 20

Street / PO Box

**GENDER (optional)**  Female  Male

\_\_\_\_\_  
City State ZIP

**DATE TO BEGIN**

**STUDENT'S HOME PHONE** ()  -   (unlisted)

\_\_\_\_\_

**PARENT / LEGAL GUARDIAN'S NAME** \_\_\_\_\_

**GRADE ENTERING**

**NAME OF PERSON PROVIDING INSTRUCTION** \_\_\_\_\_

\_\_\_\_\_

## ASSESSMENT OPTIONS (CHOOSE ONE)

I request that this student participate in the testing program currently in use in the state's public schools. I request that this take place at:

Geary  Walton  Spencer Elementary  Spencer Middle  RCHS

A portfolio of samples of the student's work will be reviewed by a *certified teacher* of my choosing. This teacher shall provide a written narrative about the student's progress in the areas of reading, language, mathematics, science, and social studies.

The student will take a nationally normed standardized achievement test normed within the last 10 years.

The student will complete an alternative academic assessment of proficiency agreed upon by the parent / legal guardian and the Superintendent.

### NOTES

The parent / legal guardian shall maintain copies of the student's academic assessment for three years, and shall submit the results of the assessment option chosen in 3rd Grade, 5th Grade, 8th Grade, and 11th Grade by June 30 of the year in which it was administered. The person providing home instruction must submit evidence of a high school diploma or equivalent, or a post-secondary degree or certificate from a regionally accredited institution or such institution as authorized by the West Virginia CCTCE or HEPC.

## PARENT / LEGAL GUARDIAN SIGNATURE AND ACKNOWLEDGEMENT

By signing here, I certify that I am the parent and / or legal guardian of the student described above and that the information provided here is accurate to the best of my knowledge. I will notify the Superintendent upon termination of home instruction and / or relocation to a different county. I understand that failure to provide the student with instruction may cause the Superintendent to seek action in circuit court to deny home instruction of the student pursuant to WV Code 18-8-1(c)(2).

\_\_\_\_\_  
Signature Date

**DATE RECEIVED** \_\_\_\_\_ **BY** \_\_\_\_\_

**PROOF OF DIPLOMA / CERTIFICATE / DEGREE ATTACHED**

**SUPERINTENDENT APPROVAL**  Approved  Denied

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date