

## PINAL COUNTY SCHOOL SUPERINTENDENT HOME SCHOOL WITHDRAWAL FORM

## **STUDENT INFORMATION:**

STUDENT INFORMATION (LAST, FIRST, MIDDLE NAME)		// DATE OF BIRTH	
ADDRESS	CITY	STATE	ZIP
TELEPHONE			
( <b>Date</b> )As of my child is no longer enrolled in the abreasons:	oove listed Home School for the	e following	FOR OFFICE USE ONLY
Is enrolled in a public school a private school a charter school graduated moved to another county or state Other:	ESA		
<ul> <li>ARIZONA STATE HOME SCHOOL LAWS FOR WITHDRAWING YOUR STUDENT AS PRE STATUTES:</li> <li>15-802 C: An affidavit of intent shall be filed within thirty days from the time the child begins to attend a pr thereafter unless the private school or the home school instruction is terminated and then resumed. The per the county school superintendent within thirty days of the termination that the child is no longer being instruction is resumed, the person who has custody of the child shall file school superintendent within thirty days.</li> </ul>	ivate school or home school and is no son who has custody of the child shall ucted at a private school or a home scl	t required notify hool. If	
AUTHORIZATION:			

## PARENT/GUARDIAN (SIGNATURE)

Please email the form to Nicole O'Brien nobrien@pinalcso.org - mail it to P.O. Box 769 | Florence, AZ | 85132 - deliver to 75 N. Bailey St. | Florence, AZ | 85132