

**NOTICE OF TERMINATION
OF A HOME EDUCATION PROGRAM**

In compliance with Section 232.0201(1)(a), Florida Statute, this serves as the written notice of termination of our home education program. Please refer to the following for the information required by law.

CHILD'S NAME:

BIRTHDATE:

PARENT / GUARDIAN
NAME(S)
(PRINT): _____

PARENT / GUARDIAN
SIGNATURE(S): _____

HOME
ADDRESS: _____

DATE OF TERMINATION: _____



Deliver this form to:

ESCAMBIA COUNTY Residents:

SANTA ROSA COUNTY Residents:

Dawn Ramirez
Office of School Choice
Escambia County School Board
30 E. Texar Street
Pensacola, FL 32503

Joyce B McCorvey
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Phone: (850) 983-5065