



Letter of Intent to Home School
Academic Year _____ to _____

This form will be processed within fourteen days after its receipt. Please complete a separate form for each child. Submit this form to:

Superintendent
Boulder Valley School District
6500 E. Arapahoe Road
Boulder, CO 80303

Student Information:

Last Name _____ First Name _____ Middle _____

Student's Date of Birth _____ Grade _____

Instructional Hours per day _____ Days per school year _____

Address _____

Home Phone Number _____

Parent/Guardian Name (1) _____

Address _____

Parent/Guardian Name (2) _____

Address _____

Check appropriate box

- Renewal Notification (Please attach the most current odd year testing results for this student.)
- New to Home Based Education
- Previous BVSD school (name) _____
- Part Time Home School/attend BVSD school (name) _____
- Transfer from out of state/district (state/district and school name) _____

Optional Information:

Parent email address: _____

Ethnic Information: (check one)

- Alaskan Native/American Indian
- Asian/Pacific Islander
- Hispanic
- Black, not Hispanic
- White, not Hispanic

Parent Signature

Date