

### HOME SCHOOL NOTIFICATION

Parent or Guardian:

Please complete the information herein so that we may maintain information that will assist the district should your child attend public school in the future.

1. Please list the names, ages and dates of birth of every child being taught in your home who is between the ages of 7 and 19.

<u>Name</u>	<u>Age</u>	<u>Date of Birth</u>	<u>Withdrawal Date</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. What is the name of the curriculum being taught in your home school?

\_\_\_\_\_

3. Is the above curriculum being taught in a bona fide manner under the direction of a parent/parents or one standing in parental authority?

\_\_\_\_\_

Parent's Name (Print): \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

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**Upon completion of this form, please return to:**

**Lupe Lujan**  
**Coordinator of Administrative Services**  
**Socorro Independent School District**  
**12440 Rojas Drive**  
**El Paso, TX 79928**

Or e-mail to [llujan@sisd.net](mailto:llujan@sisd.net)