

## Linn Benton Lincoln Education Service District Home School Office

905 4th Avenue SE • Albany, Oregon 97321-3199 Phone 541-812-2711 • Fax 541-812-2617 •  $\underline{\text{homeschool@lblesd.k12.or.us}}$ 

• www.lblesd.k12.or.us/homeschool

## HOME SCHOOL NOTIFICATION

This form is designed to satisfy notification requirements as set forth in OAR 581-021-0026 (1)(f).

Please complete all required information.

PARENT/GUA	RDIAN INF	ORMAT		se complete a	ll re	equired information.				
Name(s)										
Mailing Address					City			Zip		
Street Address (if different)				City		Zip				
Home Phone *Day Phone					*Email					
*If applicable,	list name and	relations	hip of other p	person(s) with	h w	hom information may be sha	red			
education service oparent specifically  Do not releathe informat  By Oregon law, be provided evidence  There are restart checked your structure.	districts to pro- requests that I use my high schion that may b oth parents (wh that there is a directions on the numust attach	vide, upon LBL withh nool studer e released nether man court orde release of a copy of	request, access old this informat's directory in to these indiviried, separated or, state statute student informathe court order	s to directory ination.  Information to a duals/institution, or divorced) If or legally binduation to non-contact of the contact of the conta	mili mili have ling cust	tary recruiters and/or institution includes student name, address, e access to the records of a stude document that specifically revolutional parent/guardian(s).	r institutions of higher and telephent who is kes these	none listing.  under 18 unless the district is rights.		
First Name		Middle name			L	ast Name	Legal	Name (if different)		
Date of Birth	School year are register		*^Grade Level	*Gender  M F	X	*Previously home schooled student was at home	1? – pleas	se list the last school year		
Resident School	ol District	*Reside	ent Public Sch	nool	L	ast School Attended	*Last	Date of School Attendance		
*Student has an identified learning disability Yes No					*Student with disability has a current: Individualized Education Plan (IEP) Privately Developed Plan (PDP) GED Options program for 16 or 17 year old student					
		assurance		-	-	•		.011 1 1111		
*Optional informa  You are		aw to not				assigned grade level for testing		<ul><li>if blank, one will be assigned.</li><li>ler by September 1st.</li></ul>		

As required by ORS 339.035, I am providing information to Linn Benton Lincoln Education Service District stating my intent to home school the above named child. I understand that this notice must be filed with the ESD within ten calendar days of withdrawing the above named child from school, and that this information will be provided to the resident school and district by the ESD. I understand that the above named child needs to complete standardized achievement testing at applicable dates per ORS 339.035, and that LBL request test results from all home schooled students. I understand that home school parents have the full responsibility for their student's education, including all curriculum choices and record keeping. LBL is not able to provide curriculum, books or materials, and is not involved in the direct education of home school students. LBL is not involved in reviewing, approving, or monitoring a home school student's education, beyond receiving required test results. No credits, transcript or diplomas are issued by LBL for home school students.

## Signature of Parent(s)/Legal Guardian(s)

Date

You will receive an acknowledgement letter within 90 days of LBL's receipt of this notification. This acknowledgement letter will serve as a request for required test scores. Return signed, completed form to: LBL ESD Home School Office, 905 4th Avenue SE, Albany, Oregon 97321

Date received Code	SIS	DBN	Prev
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