HOME SCHOOL FORM
PUPIL WITHDRAWAL or CHANGE OF ADDRESS

According to ARS 15-802

You are required to notify the county school superintendent if you discontinue home schooling or if you move. Use this form to update information on your student's affidavit of intent.

NAME OF CHILD_____

DATE OF BIRTH_____ADDRESS_____CITY_____ZIP CODE_____

TELEPHONE_____EMAIL ADDRESS_____

PARENT NAME (Print)_____PARENT'S SIGNATURE_____

DISCONTINUED HOME SCHOOL ☐ YES, effective_____(date) ☐ NO

CHANGES IN INFORMATION****

OLD ADDRESS_____CITY_____ZIP_____

NEW ADDRESS_____CITY_____ZIP_____

NEW PHONE NO._____NEW EMAIL ADDRESS_____

NAME OF SCHOOL DISTRICT FOR NEW ADDRESS_____

Please Fax (928) 679-8077 or mail to: Robert Kelty, Coconino County Superintendent of Schools, 2384 N. Steves Blvd., Flagstaff, AZ 86004, (928) 679-8070

****If you are new to Coconino County, please register with an official Affidavit of Intent to Home School, instead.****

Updated March 16, 2012