



**Linn Benton Lincoln Education Service District
Home School Office**

905 4th Avenue SE • Albany, Oregon 97321-3199
Phone 541-812-2751 • Fax 541-926-6047 • 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/GUARDIAN INFORMATION

Name(s)		
Mailing Address	City	Zip
Street Address (if different)	City	Zip
Home Phone	*Day Phone	*Email
*If applicable, list name and relationship of other person(s) with whom information may be shared		

RELEASE OF STUDENT INFORMATION

LBL will not disclose personally identifiable information without parent or eligible student authorization or as provided by law. Federal law requires education service districts to provide, upon request, access to directory information by a military recruiter or institution of higher education, unless the parent specifically requests that LBL withhold this information.

- Do not release my high school student's directory information to military recruiters and/or institutions of higher education. I understand that the information that may be released to these individuals/institutions includes student name, address, and telephone listing.

By Oregon law, both parents (whether married, separated, or divorced) have access to the records of a student who is under 18 unless the district is provided evidence that there is a court order, state statute or legally binding document that specifically revokes these rights.

- There are restrictions on the release of student information to non-custodial parent/guardian(s).
If checked you must attach a copy of the court order or other legal document restricting release

STUDENT INFORMATION

First Name		Middle name		Last Name		Legal Name (if different)	
Date of Birth	School year you are registering for	*^Grade Level	*Gender M F X		*Previously home schooled? – please list the last school year student was at home		
Resident School District		*Resident Public School		Last 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)				
<input type="checkbox"/> I request a <u>Parent Assurance Form</u> for the GED Options program for 16 or 17 year old student							

*Optional information

^All students must have an assigned grade level for testing purposes – if blank, one will be assigned.

You are required by law to notify the ESD of your intent to homeschool if your child is at age 6 or older by September 1st.

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. I have read and understand this.

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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