



Nine Mile Falls School District

10110 W Charles Road
Nine Mile Falls, WA 99026
509.340.4300 509.340.4301 (fax)

HOME SCHOOL DECLARATION

I do hereby declare that I am the parent, guardian, or legal custodian of the child(ren) listed below. Said child(ren) is (are) between the ages of eight and eighteen and as such is subject to the requirements found in Chapter 28A.225 RCW Compulsory Attendance. I intend to cause said child(ren) to receive home-based instruction as specified in RCW 28A.225.010. If a certificated person is supervising the instruction I have indicated this by checking the appropriate space.

Child(ren)'s Name(s)	Birthdate	Grade Level
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The home-based instruction will be supervised by a person certificated in Washington State pursuant to Chapter 28A.200.010 RCW. Yes No

Signature

Date

Address

Phone

Certificate # / and / or College
& Credit Hours

This statement must be filed annually by September 15th or within two (2) weeks of the beginning of any public school quarter, trimester, or semester with the Superintendent of the Public School District within which the parent resides.