

_____ (date)

Division of Student Services
Florida Home Education Program
489 East Drive
Miami Springs, FL 33166

Subject: Notice of TERMINATION of a Home Education Program

To Whom It May Concern:

In compliance with section 232.02 (4) (B) (1), Florida Statutes, this serves as our written notice of termination from our home education program. The following student(s) will be withdrawn:

Child's Name

Birth date

Home address: _____

Parent's Signature

Parent's Name – please print

Date of termination