

# Notification of Home School

\_\_\_\_\_  
(Date)

This document is to inform the Georgetown Independent School District that I am withdrawing my student, \_\_\_\_\_ to home school.  
(Student Name)

I, \_\_\_\_\_ request that my student be withdrawn from  
(Parent/Guardian Name)

\_\_\_\_\_ on this date \_\_\_\_\_  
(Campus Name) (Month/Date/Year)

I am aware that I am responsible for providing instruction in an appropriate Curriculum. ***Effective immediately I am homeschooling my student.***

By signing this home school notification and withdrawing my student from school, I understand that I do not hold Georgetown ISD responsible for grades, credits or attendance from this date forward.

\_\_\_\_\_  
Printed name of Parent/Guardian

\_\_\_\_\_  
Signature of Parent Guardian

\_\_\_\_\_  
Address, City, State, Zip Code

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
School District Representative

\_\_\_\_\_  
Campus

\_\_\_\_\_  
Date Received

**Campus Counselor:**  
**Please submit a copy of this form to the following**  
**Departments**  
District PEIMS Coordinator  
GISD Truancy Officer  
Student's Cumulative Folder