Madison County Homeschool Application				
Previous School:	Grade Level Last Completed:			
Student's Full Legal Name: Last:	First		Middle	Suffix
			_ Grade	
Parent Guardian Information:				
Student lives with:				
Legal Guardian	Relationship			
House #: Street Name:		_ Apt. #:	City:	
State:Zip Code: Primary T	Telephone: ()			
Have you ever conducted homeschool in Madison County?				
If yes, child's name				
Acknowledgement				
I am registering my child to participate in Homeschool. I have read and fully understand the provision of Section 1002.41 and 1002.01, Florida Statutes procedures pertaining to compliance and enforcement of Home Education. The information contained herein is accurate and true to the best of my knowledge.				
Parent/Guardian Signature	Date	_		