

**UINTAH SCHOOL DISTRICT OFFICE OF EDUCATION  
AFFIDAVIT FOR HOME SCHOOL INSTRUCTION  
(For Students Ages 6-18)**

Student # (District School Info)	Student Name(s)	Birth Date	New/Renew (District School Info)	School Student(s) Should Attend in Your Area (If Known)	Please list any classes or activities your student may participate in at the local school with the principal's permission (optional)
Address:		City:	Zip:	Home Phone (optional):	
Parent/Guardian:		Address (If different than student):	Email (optional):	Work Phone (optional):	
Reason for Home Schooling (optional):					

**PARENT/GUARDIAN AFFIDAVIT**

By signing this affidavit, the parent/guardian assumes sole responsibility for the education of the student(s), except to the extent the school-age minor is dual enrolled in a public school under Section 53A-11-102.5. The parent/guardian is solely responsible for the selection of instructional materials and textbooks, the time, place and method of instruction, and evaluating the home school instruction.

- My child(ren) (Names) \_\_\_\_\_ may have a disability which could qualify him/her for state or federal service consistent with the Individuals with Disabilities Education Act (IDEA), 20 U.S.C. 1401 et. seq. Please contact me with further information.
  
- My child(ren) (Names) \_\_\_\_\_ Has an Individual Education Plan (IEP) under IDEA, 20 U.S.C. 1401 et. seq. My decision to home school does not imply that the public school has not offered a free and appropriate public education. I understand that my child(ren) will no longer receive services under the IEP unless he/she is dual enrolled under Section 53A-11-102.5 and State Board of Education Administrative rule R277-438.

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The undersigned parent(s) expressly prohibits the release of any and all information contained in this document, including directory information as defined in 20 U.S.C. 1232g(a)(5)(A).

**TO BE SIGNED BEFORE A NOTARY**

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

\_\_\_\_\_  
Date

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,

\_\_\_\_\_ personally appeared before me, did affirm that the statements herein are accurate, signed the foregoing document and acknowledged to me that she/he executed the same.

\_\_\_\_\_  
Notary Public for the State of Utah  
My commission expires: