Homeschool Student Information Packet

Dear Parent/Guardian,

Enclosed you will find the form to complete for our records as you begin to homeschool your child within the Pine Bush Central School District.

Once you have completed the enclosed form and gathered the appropriate supporting documents, please scan all and email to sandra.seyler@pinebushschools.org.

When possible, please include all forms and documents in one email.

Homeschool Information Checklist

Please complete and return the following form:

- Homeschool Student Information Form

Please provide the following documents:

- Copy of child's birth certificate containing raised seal to prove child is of compulsory age.
- Proof of residence (please refer to "Proof of Residency" section on the instructions (attached).

If you have any questions regarding enrollment, **call 845-744-4027 or email sandra.seyler@pinebushschools.org**.

Thank you in advance for your cooperation in obtaining the proper documentation.

Homeschool Student Information Instructions

HOMESCHOOL STUDENT INFORMATION INSTRUCTIONS

The following documentation must be provided to the school district for all homeschooled students. The form and required documents may be scanned and emailed to sandra.seyler@pinebushschools.org.

1) Proof of Residency: All new homeschool students entering the Pine Bush Central School District must provide **two forms** of proof of residency, one primary and one secondary.

Primary Proof of Residency (provide one of the following):

- tax bill;
- signed lease or rent receipt with landlord's name, address, telephone number, section, lot and block number;
- notarized letter from landlord supported by rent receipt with landlord's name; or
- mortgage statement/deed showing purchase of home, name, address, section, lot and block number.

If you live with a district resident, (e.g.: parent, grandparent, friend, etc.) and do not pay rent, please complete the set of signed and notarized affidavits, which will be provided upon request. The affidavits must be completed as follows:

• The first is to be signed by the district resident, who must also provide proof of residency as stated above.
• The second is to be signed by the parent or legal guardian of the student, who should also provide additional documents from the non-exhaustive list below to establish residency.

Secondary Proof of Residency (provide one of the following):

- most recent utility bills (phone, gas, electric, cable) or deposit receipt for gas, electric, phone service start-up;
- water bill;
- cell phone bill;
- DSS verification;
- income tax return;
- voter registration card;
- copy of state driver's license or state picture ID card showing current district address (no temporaries). If address has been changed, this will not be accepted.

2) Birth Certificate: Proof of your child's age is requested. An original birth certificate or a certified copy with a raised seal should be provided. If you do not have an original birth certificate, we can accept a valid passport or your child's original baptismal certificate with a raised seal. If none of these are available, other documents may be considered to verify your child's date of birth.

Thank you in advance for providing the documentation required for enrollment.

Homeschool Student Information Form

STUDENT INFORMATION

Last Name | Suffix | First Name | Middle Name | Nickname

Date of Birth: _____ Gender: □ Male □ Female Grade Entering: _____

Is Child Hispanic or Latino: □Yes □ No

Ethnicity: (New York State requires an ethnicity code for data collection purposes. Please select the code closest to your child's ethnicity.)

□ White □ Black or African American □ Asian □ American Indian/Alaska Native □ Native Hawaiian/Other Pacific Islander

PLEASE LIST ADDRESS WHERE CHILD RESIDES

Home/Residency Address | Home/Residency City | Home/Residency Zip Code

Mailing Address (if different from above) | Mailing City | Mailing Zip Code

Residence County: □ Orange County □ Sullivan County □ Ulster County

Residence Township: □ Crawford □ Gardiner □ Mamakating □ Montgomery □ Mount Hope □ Shawangunk □ Wallkill

FAMILY INFORMATION WITH WHOM CHILD RESIDES

Parent/Guardian Relationship to Child: □ Father □ Mother □ Guardian □ Step Parent □ Foster Parent □ Other

Last Name | First Name

Home Number | Mobile Number

Email Address

Parent/Guardian Relationship to Child: □ Father □ Mother □ Guardian □ Step Parent □ Foster Parent □ Other

Last Name | First Name

Home Number | Mobile Number

Email Address

EMERGENCY CONTACT INFORMATION

Name: _____

Relationship: _____

Home Phone Number: _____

Mobile Phone Number: _____

I hereby certify that all the information provided above is true and accurate to the best of my knowledge.

Parent/Guardian Name: _____ Relationship to Child: _____

Parent/Guardian Signature: _____ Date: _____