

## Dual Enrollment Home Education Verification Form

Please complete all sections of this form and email it to [DualEnrollment@nfc.edu](mailto:DualEnrollment@nfc.edu).

*This form verifies that the parent or legal guardian of the student listed below is registered with a school district within North Florida College's service area (Hamilton, Jefferson, Lafayette, Madison, Suwannee, or Taylor County) and is in compliance with the Home Education Program pursuant to Florida Statute 1002.41.*

*This form must be signed by a school district representative or include documentation verifying the student's enrollment in a home education program. The completed form must be submitted with the student's Dual Enrollment Application to North Florida College.*

*Alternatively, the school district may submit a letter on official letterhead confirming the student's compliance with home education requirements and including the information listed below.*

*Please contact the local school district office with any questions regarding Home Education procedures.*

### STUDENT INFORMATION

Legal First Name: \_\_\_\_\_ Legal Middle Name: \_\_\_\_\_

Legal Last Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

### PARENT / GUARDIAN INFORMATION

Legal First Name: \_\_\_\_\_ Legal Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### TO BE COMPLETED BY SCHOOL DISTRICT OFFICIALS ONLY

Home Education Administrator Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please Indicate School District:**

☐ Hamilton ☐ Madison ☐ Jefferson ☐ Lafayette ☐ Suwannee ☐ Taylor

Date Student Was Registered as a Home Education Participant in the District: \_\_\_\_\_

Student is currently in compliance as specified in Home Education Statute 1002.41: ☐ Yes ☐ No

\_\_\_\_\_  
District Home Education Administrator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Date