

Home Schooling Application Form

DATE APPLICATION SUBMITTED: _____

ZONED SCHOOL: _____

PARENT/GUARDIAN INFORMATION (PLEASE PRINT):

NAME:

_____ _____
Parent/Guardian 1 *Parent/Guardian 2*

MAILING ADDRESS (INCLUDING POSTAL CODE):

HOME PHONE NUMBER:

ALTERNATE NUMBER:

EMAIL:

STUDENT INFORMATION (PLEASE PRINT):

NAME:

_____ _____ _____
 LAST FIRST MIDDLE

DATE OF BIRTH:

_____ _____ _____
 Month Day Year

MCP NUMBER:

GRADE:

HOME SCHOOL TEACHER/INSTRUCTOR INFORMATION (PLEASE PRINT):

MCP EXPIRY DATE:

NAME:

PHONE NUMBER (If different from above):

Credentials/Qualifications to Home School:

EMAIL (if different from above):

Education Program Outline: Please list all courses to be offered and the Curriculum and Method of Instruction and Assessment (If additional space is needed, please add attachment(s).)

Mathematics

English Language Arts:

Science

Social Studies

Education Program Outline: Please list all courses to be offered and the Curriculum and Method of Instruction and Assessment (If additional space is needed, please add attachment(s).)

Other Course: _____

Other Course: _____

Other Course _____

Additional Comments (e.g., special learning needs/concerns):

Parent/Guardian 1
Signature

Date

Parent/Guardian 2
Signature

Date

PLEASE RETURN TO:

Eastern Region	Central Region	Western Region	Labrador Region
Home Schooling Coordinator NLSchools Avalon/HQ Office P.O. Box 8700 3rd Floor, West Block Confederation Building St. John's, NL A1B 4J6 PHONE: (709) 729-1234 FAX: (709) 729-9876	Home Schooling Coordinator NLSchools Central Office 203 Elizabeth Drive Gander, NL A1V 1H6 PHONE: (709) 256-2547 FAX: (709) 651-3044	Home Schooling Coordinator NLSchools Western Office P.O. Box 368 10 Wellington Street Corner Brook, NL A2H 6G9 PHONE: (709) 637-4000 FAX: (709) 634-1828	Home Schooling Coordinator NLSchools Labrador Office 16 Strathcona Street Happy Valley-Goose Bay, NL AOP 1E0 PHONE: (709) 896-2431 FAX: (709) 896-9638

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