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MONROE COUNTY SCHOOL DISTRICT
CHARTING THE COURSE
To Excellence in the Monroe County Schools

Home Education Annual Evaluation Form

Dear Parent(s):

In accordance with Florida Statute 1002.41 (section c) parents of a home school child shall provide for an annual educational evaluation which documents and demonstrates the student's educational progress at a level commensurate with his or her ability. The parent shall select the method of evaluation and shall file a copy of the evaluation annually with the district school superintendent's office in the county in which the student resides.

The annual educational evaluation shall consist of one of the following:
1. A teacher selected by the parent shall evaluate the student's educational progress upon review of the portfolio and discussion with the student. Such teacher shall hold a valid regular Florida certificate to teach academic subjects at the elementary or secondary level;
2. The student shall take any nationally normed student achievement test administered by a certified teacher;
3. The student shall take a state student assessment test used by the school district and administered by a certified teacher, at a location and under testing conditions approved by the school district;
4. The student shall be evaluated by an individual holding a valid, active license pursuant to the provisions of s. 490.003(7) or (8); or
5. The student shall be evaluated with any other valid measurement tool as mutually agreed upon by the district school superintendent of the district in which the student resides and the student's parent.

The district school superintendent or designee shall review and accept the results of the annual educational evaluation of the student in a home education program. If the student does not demonstrate educational progress at a level commensurate with her or his ability, the district school superintendent shall notify the parent, in writing, that such progress has not been achieved. The parent shall have 1 year from the date of receipt of the written notification to provide remedial instruction to the student. At the end of the 1-year probationary period, the student shall be reevaluated as specified in paragraph (1)(c). Continuation in a home education program shall be

Mr. Michael J. Henriquez,
Coordinator of Alternative Education, Monroe County School District
2100 Flagler Ave. ▪ Key West, FL 33040 ▪ Tel: (305) 293-1400 ext. 54444 ▪ Fax: (305) 293-1429
www.KeysSchools.com

Home Education Annual Evaluation Form

contingent upon the student demonstrating educational progress commensurate with her or his ability at the end of the probationary period. Monroe County School District is requesting the annual educational evaluation using the form on Page 3.

If any assistance is needed, please do not hesitate to contact Ayesha Osborne or myself. Our contact information is listed at the bottom of each page.

Sincerely,

Mike Henriquez
Coordinator of Alternative Education

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Student's Name: _____ (PLEASE PRINT)

Please select ***one*** of the following options:
_____ 1. Upon review of the portfolio and discussion with the pupil named above **or**
_____ 2. Upon a review of the standardized test taken by the pupil named above
_____ 3. The student has **not** demonstrated progress at a level commensurate with his/her ability.

I have found that the pupil named above has demonstrated progress at a level commensurate with his/her ability. Florida Statute requires that I hold a valid regular Florida certificate to teach **academic subjects** at the elementary or secondary level. My signature below attests to my qualification and the student's progress.

ONLY if the student's demonstrated progress *is* ***not*** commensurate with his/her ability should a copy of your certificate, test score report (if applicable), and a comprehensive written evaluation be enclosed.

Certified Teacher/Evaluator: _____ (PLEASE PRINT)

Certified Teacher/Evaluator: Signature: _____

Phone No or email: _____

Date of Evaluation: _____

Teacher Certification Number: _____

Certification Expiration: _____

Parent(s)/ Guardian(s) Name: _____ (PLEASE PRINT)

Parent/Guardian's Address: _____ (PLEASE PRINT)

Return the completed form to:

Ayesha Osborne via email at: Ayesha.Osborne@Keysschools.com
Or
Mail to: Alternative Education/Home Education
2100 Flagler Ave
Key West, FL 33040