



EXPRESSION OF INTEREST TO EDUCATE A CHILD OTHER THAN AT SCHOOL

Child's Particulars *(Please complete a separate form for each child)*

Full Name of Child:.....

Date of birth:..... Yr Group Male/Female

Home Address:.....

..... Postcode.....

Current School or last school attended if no longer on school roll:

.....

Name of parent/s or those who have legal responsibility:

.....

Address at which education will take place (if different to above):

.....

..... Postcode.....

Daytime Telephone Number:.....

Does your child have a Statement of Special Educational Needs? YES/NO

If so, please provide further details:

.....

.....

Who will be regularly involved in the education of your child, e.g. mother, father, partner, relative, tutor?

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It would be helpful if you could give some background to your decision to provide education at home.

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Declaration

I/We have received a copy of the Elective Home Education Guidelines booklet.

It is my/our intention to withdraw my/our child with effect from:.....

I/We confirm that there are no Court Orders in respect of the above-named child which would prevent me/us from taking this course of action.

Signed:.....

Date:.....

Please return this form to:

Stephanie Wilman and Danielle Doyle
Education Welfare Service
1st Floor Princess Buildings
Princess Street
HALIFAX
HX1 1TS
Tel. 01422 266125

Should you have any queries or require assistance with completing this form, please contact the above office.

If you change your address or your child returns to school, please let us know in writing.

Thank you for providing this information which will be helpful to our Home Education Officer whom you will see from time to time.