

SOUTHERN FULTON SCHOOL DISTRICT

**AFFIDAVIT OF THE SUPERVISOR OF A HOME EDUCATION PROGRAM
SECONDARY SCHOOL AGED STUDENT**

TO THE SUPERINTENDENT OF THE SOUTHERN FULTON SCHOOL DISTRICT;

1. I attest that I _____ am the Custodian of _____ that
(Name of Supervisor) (Name of Student(s))

I am the supervisor of the home education program and am responsible for the provision of instruction in the home education program and that I have earned a high school diploma or its equivalent evidence of which is attached. This program will be conducted at, _____.

(Full Address)

The phone number at this site is _____.
(Phone Number)

2. I attest that the Home Education Program will be in compliance with the public School Code.

3. I attest that the subjects listed in paragraph four below will be offered in the English language for a minimum of one hundred eighty (180) days of instruction or a minimum of nine hundred ninety (990) hours.

4. I attest that the following courses shall be taught:

- a. English: To include language, literature, speech and composition.
- b. Science: Geography, social studies, to include civics, world history, history of the United States and Pennsylvania.
- c. Mathematics: To include general mathematics, algebra and geometry.
- d. Art; Music; Physical Education; Health; Safety Education, including regular and continuous instruction in the dangers and prevention of fires.
- e. Other courses may be taught at the discretion of the supervisor.

5. I attest that the education objectives in the home schooling program are by subject area as attached to this affidavit. (Attach objectives)

6. I attest that _____ has been immunized against the following diseases and I
(Students Name(s))
have evidence thereof:

- a. Diphtheria.
- b. Tetanus.
- c. Polio Myelitis.
- d. Measles (Rubella).
- e. German Measles (Rubella).
- f. Mumps.

7. I attest that _____ has received the health and medical service required by
(Student Name(s))
services required by article XIV of the public school code. Article XIV requires that every child of school age be given by methods established by the state's Advisory Health Board, an annual vision test, a hearing test, a measurement of height and weight, tests for tuberculosis under medical supervision and other tests

required by the Advisory Health Board. Children upon entry into school and in the 6th and 11th grades must have a medical examination and comprehensive appraisal of health by a physician. Children upon entry into school and in the 3rd grade and 7th grade must have a dental examination by a dentist. A comprehensive health record shall be maintained for each child.

8. I attest that the home educational program will comply with Section 1327 and 1327.1 of the public School Code.

9. I attest that no adult living in the home and no person having legal custody of _____
(Student Name(s))
has been convicted within five years of today's date of any of the following offenses under Title 18 of the Pennsylvania Consolidated Statutes:

- Chapter 25 (Relating to Criminal Homicide).
- Section 2702 (Relating to Aggravated Assault).
- Section 2901 (Relating to Kidnapping).
- Section 2902 (Relating to Unlawful Restraint).
- Section 3121 (Relating to Rape).
- Section 3122 (Relating to Statutory Rape).
- Section 3123 (Relating to Involving Deviate Sexual Intercourse).
- Section 3126 (Relating to Indecent Assault).
- Section 3127 (Relating to Indecent Exposure).
- Section 4303 (Relating to endangering welfare of children).
- Section 4305 (Relating to Dealing in infant children).
- A Felony offense under Section 4902 (B) (Relating to prostitution and related Offenses).
- Section 5903 (C) or (D) (Relating to obscene and other sexual materials).
- Section 6312 (Relating to Sexual Abuse of children).

(Signature of Supervisor)

(Date Signed)

(Signature of Notary)

(Date of Notarization)

SEAL

ATTACHMENTS:

- Evidence of a High School Diploma or Equivalent. (Copy or notarized statement of same.)
- Education objectives by subject matter.
- Evidence of Immunization.