



Arsenal Technical High School
 1500 E. Michigan Street • Indianapolis, IN 46201
 Phone: 317.693.5308 • Fax: 317.693.5396

Home-School Verification Form

Please fill out this form completely and sign.

Parent's Name:

Street Address:

City, State, Zip:

Phone Number:

Student's Name:

Student's Date of Birth:

Student's ID Number:



Please complete the section that pertains to your child:

I, _____ the parent of _____ am withdrawing my child

as of the following date _____ . He/she will be transferring to home-school instruction to pursue a high school diploma. I understand that under Indiana Code (IC 20-26-13-10), the home-school setting "must provide instruction equivalent to that given in the public schools."

I understand that it is recommended that the home school is registered with the state.

OR

I _____ the parent of _____ am withdrawing my child to pursue a GED through an online program at home, or through self-study, parental assistance, or another type of GED program.

I understand that withdrawing my child to pursue a GED is NOT a transfer and that my child will be coded as a dropout.



Parent Signature:

Date:

Received by:

Title:

School Official's Signature:

Date: