



SEMINOLE COUNTY PUBLIC SCHOOLS, FLORIDA  
HOME EDUCATION ANNUAL EVALUATION

Student Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

- Check this box if your street address, phone number, or email address has changed in the past 12 months. Please note any updated information at the bottom of this form.
- Check this box if you are terminating the Home Education program and attach the SCPS Notice of Termination form.

Check the box for the one annual educational evaluation option you have selected for this student:

- Option 1:** Portfolio review by a teacher with a valid Florida certificate. Evaluator should complete statement below or attach their own form. See F.S. 1002.41(1)(c)(1)
- Option 2:** Nationally normed test administered by a certified teacher. Attach results to this form; the test administrator may also sign the evaluation statement below at his/her discretion. This option includes, but is not limited to, SAT, ACT, PSAT, etc. See 1002.41(1)(c)(2).
- Option 3:** State student assessment test (e.g. FSA, EOC, etc.). Attach results to this form. See 1002.41(1)(c)(3).
- Option 4:** Evaluation by a Florida licensed psychologist or school psychologist. It is not necessary to submit the entire evaluation, but the individual must complete the statement below or attach their own form. See 1002.41(1)(c)(4)
- Option 5:** *Local option*—attach a transcript from Seminole County Virtual School (SCVS) or Florida Virtual School (FLVS) which indicates successful completion of core classes in English Language Arts, Mathematics, Science, and Social Studies. If the transcript shows failing or incomplete grades in these areas, or if the student did not take all of these courses at FLVS and/or SCVS, then this option is not available for the annual educational evaluation.

**For options 1 (required), 2 (optional), & 4 (required), the certified/licensed individual must complete this section:**

Name of Evaluator: \_\_\_\_\_ Phone #: \_\_\_\_\_

Florida Certificate/License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Upon review of the portfolio or nationally normed test scores and discussion with the student named above, I find that the student:

- has demonstrated educational progress at a level commensurate with his or her ability and is ready to continue instruction at the next level.
- has not demonstrated educational progress at a level commensurate with his or her ability.

Date of Evaluation: \_\_\_\_\_ School Year or Time Period Evaluated: \_\_\_\_\_

Evaluator Signature: \_\_\_\_\_

**This form & any other documents may be submitted in person or via U.S. mail, fax, or scan & email**

Contact Home Education:	Web: <a href="http://www.scps.k12.fl.us/homeeducation">www.scps.k12.fl.us/homeeducation</a>	Email: <a href="mailto:homeschool@scps.us">homeschool@scps.us</a>
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