

AFFIDAVIT OF THE SUPERVISOR OF A HOME EDUCATIONAL PROGRAM

The compulsory education section of the Pennsylvania school code states:
“It is the policy of the Commonwealth to preserve the primary right of the parent or parents, or person or person in loco parents to a child to choose the education and training for such child.”

Before me, the undersigned notary public, this day personally appeared

_____, being first duly sworn on oath, deposes and says:

I attest that I am a parent or guardian or other person having legal custody of the child (or children) listed below, that I am responsible for the provision of instruction in his/her/their home educational program in which the following courses are offered in the English language for a minimum of one-hundred-eighty (180) days of instruction **or** a minimum of nine-hundred (900) hours of instruction at the elementary school level, or nine-hundred-ninety (990) hours **or** 180 days of instruction at the secondary level (grades 7-12), and that the home education program is otherwise in compliance with the provisions of the Public School Code:

At the elementary school level the following courses shall be taught: English to include spelling, reading, and writing; Arithmetic; Science; Geography, History of the United States and Pennsylvania; Civics, Safety Education, including the regular and continuous instruction in the dangers and prevention of fires; Health and Physiology; Physical Education; Music and Art.

At the secondary school level the following courses shall be taught: English to include language, literature, speech and composition; Science; Geography; Social Studies to include Civics, World History, History of the United States, and Pennsylvania History; Mathematics to include General Mathematics, Algebra, and Geometry; Art; Music; Physical Education; Health; and Safety Education including regular and continuous instruction in the dangers and prevention of fires. Other courses may be included at the discretion of the supervisor.

I also attest that each child in the home educational program has received the health and medical services required by Article XIV of the Public School Code and that a Comprehensive health record is being maintained for each child. I also attest that I have a high school diploma or its equivalent, and that all adults living in the home where the education is taking place has not been convicted, within five years immediately preceding the date of the affidavit, of the criminal offenses enumerated in subsection (E) of section 111 of the school code. These offenses relate to criminal homicide, aggravated assault, kidnapping, unlawful restraint, rape, statutory rape, involuntary deviate sexual intercourse, indecent assault, indecent exposure, concealing a death of a child born out of wedlock, endangering welfare of children, dealing in infant children, corruption of minors, and sexual abuse of children. They also include felony offenses relating to

prostitution and related offenses, and felony offenses relating to obscene and other sexual materials.

Attached is:

- (1) An outline of proposed educational objectives by subject area of each student.
- (2) Evidence that each child has been immunized or has a religious or medical exemption from immunizations.
- (3) If a child in the home educational program has been identified pursuant to the provisions of the education of the handicapped act as needing special education services, excluding those students identified as gifted or talented, then also attached is written notification of approval from a Pennsylvania-certified special education teacher, or a licensed clinical psychologist, or a certified school psychologist that this program addresses the specific needs of the student.
- (4) My signature verifies the fact that I have a High School diploma or a College degree or that I have obtained a General Equivalency Diploma (GED).

Name of Supervisor of Home Educational Program: _____

Address of Home Educational Program Site: _____

City _____ State _____ Zip _____ County _____

Phone Number of the Home Education Program Site: _____

Name and Age of each child who shall participate in the program:

Signature: _____

Subscribed and sworn before me this day _____

(date)

Notarization:

File with the Superintendent School District of residence prior to commencement of the Home Education Program and annually Thereafter on or before August 1st.

Notary Public