

PINELLAS COUNTY SCHOOLS  
**HOME EDUCATION UPDATE/CHANGE FORM**

Please indicate any changes to enable us to update your records:

Parent/Guardian Name: \_\_\_\_\_

Student Name: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_ Change in address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_ Withdrawing student from Home Education Program and Reason:  
Name Public/Private School Moved Dropped Graduated  
(Age 16) or GED  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Send to: Pinellas County Schools  
Attn: Home Education Dept.  
P. O. Box 2942  
Largo, FL 33779-2942**