



Home Education Request for Duplicate Verification Letter

Student's Name (PRINT):

Student's Date of Birth:

Current Address to include City, zip code, and phone number:

Parent/Legal Guardian Name Printed:

Parent/Legal Guardian Signature:

Date:

*Evaluations must be up-to-date **before** a duplicate verification letter will be issued. Duplicate verification letters must be mailed to the address listed above. **We do not accept faxed or email copies of any form.** Please allow 36 – 48 hours for processing. **THANK YOU!***

Return completed form to the following: Home Education
Office of Student Services
2700 Judge Fran Jamieson Way
Viera, FL 32940-6699