

**Home School Declaration  
Oak Grove R-VI School District  
601 SE 12<sup>th</sup> Street  
Oak Grove, MO 64075**

Date: \_\_\_\_\_

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

Street Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

Street Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

**Pursuant to the provisions of Chapter 167.031 (RSMo), we have elected to educate our child/children at home:**

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Home School Teacher(s): \_\_\_\_\_

Home School Address: \_\_\_\_\_

Home School City/Zip: \_\_\_\_\_

Home School Phone: \_\_\_\_\_

**We realize that you have statutory responsibility for the investigation of cases of suspected truancy regarding public school students. Therefore, this form is being provided to relinquish that responsibility from the public school system.**

**This form shall not be construed to be a registration, which is an option contained in Chapter 167.042 (RSMo).**

Parent Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_