

Tennessee Notice of Intent to Home School

To be completed by school system	
School system name: COCKE CO.	System number: 150
Date received: 2026-2027	
Received by name:	
Signature:	
Title:	

This form should be completed only by the parent(s) or legal guardian(s) conducting an **independent home school** under the supervision of the superintendent of a local education agency (LEA). Parents enrolling their child in an approved church-related "umbrella" school or an approved Category III accredited online school do not need to submit this form.

"Home schools" are schools conducted by parents or legal guardians for their own children, which are distinct from degree-granting online or distance education schools. This form may be utilized as notice of your intent to conduct an independent home school, meaning that you will serve as the primary teacher for the student(s) as permitted by Tenn. Code Annotated § 49-6-3050. **Please complete both pages of the form and return both pages to your local public school system office before the start of the school year.**

PLEASE PRINT

Part 1: Student Information

For each student in **grades K-12**, please list the following information:

1.	Last name	First Name	Middle Name	Grade	Age
	Birthdate	Social Security Number (optional)	Subjects to be taught		Daily hours of instruction
2.	Last name	First Name	Middle Name	Grade	Age
	Birthdate	Social Security Number (optional)	Subjects to be taught		Daily hours of instruction
3.	Last name	First Name	Middle Name	Grade	Age
	Birthdate	Social Security Number (optional)	Subjects to be taught		Daily hours of instruction
4.	Last name	First Name	Middle Name	Grade	Age
	Birthdate	Social Security Number (optional)	Subjects to be taught		Daily hours of instruction
5.	Last name	First Name	Middle Name	Grade	Age
	Birthdate	Social Security Number (optional)	Subjects to be taught		Daily hours of instruction
6.	Last name	First Name	Middle Name	Grade	Age
	Birthdate	Social Security Number (optional)	Subjects to be taught		Daily hours of instruction

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Part 2: Parent Information

Please provide information **only** for the parent(s) or legal guardian(s) who will teach. Legal guardian(s) will need to present proof of guardianship.

Name of parent(s) or guardian(s)

Mother	Last Name	First Name
Father	Last Name	First Name
Guardian	Last Name	First Name

Contact Information

Mailing Address	Address	
	City	Zip Code
Residential Address (if different from mailing address)	Address	
	City	Zip Code
Phone Number		
Email Address		

Parent/Guardian Educational Background (complete only for parent(s)/guardian(s) who will teach)

For grades K-12, I have a high school diploma or equivalency credential. Yes ☐ No ☐

Note: If mailing this form, please attach documentation of qualifying education. If presenting this form in person, please bring documentation of your qualifying education for school staff to verify.

Parent/Guardian Signature

Date