

## Florida Home Education Annual Evaluation

I hereby affirm that on \_\_\_\_\_, I \_\_\_\_\_,  
(Date) (Teacher's Name)  
a Florida-certified teacher, evaluated the Florida home education student named below.

In accordance with Florida Statute §1002.41(1)(f)(1), I find that the student has demonstrated educational progress at a level commensurate with his or her ability.

### STUDENT & PARENT/GUARDIAN INFORMATION

Student's First and Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Parent/Guardian's First and Last Name: \_\_\_\_\_

### TEACHER INFORMATION

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

Certificate Number: \_\_\_\_\_ Expires: \_\_\_\_\_

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