

Superintendent
Dylan Tedders



Okeechobee County School Board

863-462-5000

700 S.W. Second Avenue
Okeechobee, Florida 34974

Fax 863-462-5151

Chairperson
Malissa Morgan
Vice Chairperson
Jill Holcomb
Members

Dr. Christine B. Bishop
Melisa Jahner
Amanda Riedel

Letter of Termination (Please print all information)

Dear Superintendent,

It is my intention to no longer home educate the following child(ren):

The date of termination is _____
(Month) (Day) (Year)

Student's Name(s) Birthdate Grade School Name (if returning)

The reason for termination is (check one):

The child has been or will be enrolled in a public, parochial, or private school

The child has reached the age of eighteen (18) and is no longer of compulsory school age

The child has reached the age of sixteen (16) and the parent or guardian choose to formally withdraw from school

The child will no longer reside in Okeechobee County, Florida. The new residence will be:

City and State

Other: Pursue GED _____

Parent/Guardian Signature Address Telephone Number
(If any information is incorrect, please make changes so we can update our records.)

Return to:
Director of Student Services of Okeechobee County Schools 700 SW 2nd Avenue, Room
#210 Okeechobee, FL 34974