

**Puyallup School District**

**Optional Homeschool Information**

GENDER:  MALE  FEMALE

ETHNICITY:  Am. Indian  Asian  Black  Hispanic  Caucasian  Multiracial

YES  NO Participating in Running Start (11<sup>th</sup> and 12<sup>th</sup> graders only)  
\_\_\_\_\_(Student Name)

YES  NO Has student(s) previously attended a Puyallup Public School?  
Student(s) Name: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Home/Cell Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Request for Part-Time Attendance or Ancillary Services  
From a Student Receiving Home-Based Instruction**

Name of student: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_

Address of student: \_\_\_\_\_

City and zip code: \_\_\_\_\_

Name of parent: \_\_\_\_\_

Telephone - Home/Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Public school where service is requested: \_\_\_\_\_

Signature of parent or guardian: \_\_\_\_\_

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

Service or course requested and date(s) student wants to participate:

Service/course: \_\_\_\_\_ Date: \_\_\_\_\_

Service/course: \_\_\_\_\_ Date: \_\_\_\_\_

Service/course: \_\_\_\_\_ Date: \_\_\_\_\_

Service/course: \_\_\_\_\_ Date: \_\_\_\_\_

**Return to:** Puyallup School District  
Attn: Shelly Teele  
302 2<sup>nd</sup> St. SE  
Puyallup, WA 98372