



OFFICE OF ENROLLMENT SERVICES
HOME SCHOOL AFFIDAVIT

CF ID No.: _____

Student Legal Name: _____
Last First Middle (complete) Jr., etc.

Thank you for choosing to apply for admission to the College of Central Florida. In order to comply with the Florida Department of Education's guidelines governing enrollment in college level courses, we must have the following verification completed and notarized.

I, _____ as parent or legal guardian of _____ certify that:
Print name of parent/guardian Print student name

1. I give this affidavit as a part of a request to have the student admitted to the College of Central Florida.
2. I have educated the student in a home school program in full compliance with all Florida laws including, but not limited to, Florida Statute 1002.41.
3. The student meets all legal and educational qualifications to be admitted to the College of Central Florida.
4. I acknowledge that this affidavit is given under oath and I understand the penalty for perjury or false statements.
5. The student has graduated from a Home School Education Program that meets the requirements outlined in Florida Statute 1002.41.

Date requirements for high school graduation were completed _____
MM/YYYY

Parent/Legal Guardian Signature _____

Date (MM/DD/YY) _____

Student Signature _____

Date (MM/DD/YY) _____

FOREIGN LANGUAGE CERTIFICATION

I certify that my child named on this affidavit has successfully completed two academic years of a single foreign language as part of his or her home school curriculum. **I understand that other universities may not accept a Home School declaration for foreign language and my child may be required to take foreign language or provide proof of proficiency such as passing CLEP scores.**

Home School Official (Parent's) Signature _____

Date (MM/DD/YY) _____

Notary: The foregoing instrument was acknowledged before me this _____ day of _____, 20 _____

by _____, the parent, who has produced photo identification, and who did sign this affidavit.

Notary Signature _____

[stamp/seal]

Notary name printed _____

Commission Expires: _____
Date: MM/DD/YY

Please return this affidavit to Enrollment Services. If you are unable to complete the above verification, you will not be eligible for enrollment until you receive a state issued General Education Diploma (GED).

OFFICE OF ENROLLMENT SERVICES USE ONLY:

Processed by: _____

Date: _____
MM/DD/YY