



MONTGOMERY
PUBLIC SCHOOLS

Student Support Services Home School Enrollment Form

Student Name (Last, First)	Address City, State, Zip	Date of Birth	Grade

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____

Date: _____ Contact Number: _____

Academic Year: _____

If your child returns to Montgomery Public Schools, he or she must take placement/subject specific tests to determine grade placement.

**Fax form to 334-269-3998 or mail:
Montgomery Public Schools
ATTN: Student Support Services
321 Early Street
Montgomery, AL 36104**