



Douglas Education Service District

1871 NE Stephens St, Roseburg, OR 97470 • Phone (541) 440-4777 • fax (541) 440-4771 • www.douglasesd.k12.or.us

GED Option Program DESD/Parent Assurance

Parent Assurances:

Parent Name _____ Student's Name _____

Telephone Number _____ Student's SSN _____

Mailing Address _____
PO Box/Street _____ City _____ State _____ Zip Code _____

Student Requirements:

I/We verify that the above-named student:

- is at least 16 years of age. Date of Birth _____
- demonstrates an independent reading level (in English or Spanish) at the eighth grade level or above on the Reading component of either a nationally-normed test, the Oregon Statewide Assessment or NWEA Assessment. (A copy of these test scores must be submitted with this assurance as proof of reading level.)
- has determined the GED option to be the most appropriate available at this time.
- has completed the appropriate home-school testing as stated in OAR 581-021-0025(5), if applicable.

Please indicate your relationship to the student listed above:

_____ Parent

_____ Legal Guardian: legal documentation attached legal documentation on file at DESD

Parent's / Guardian's Signature _____ Date _____

Student Signature _____ Date _____

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DESD Verification of Home School Registration

The above-named parent/guardian has notified the Douglas ESD of his/her intent to home school.

Date notice of intent received: _____

DESD Home School Representative: _____ Date: _____

*Douglas ESD appreciates the fact that students can receive an education through a variety of pathways.
Douglas ESD is here to serve as a resource and partner in your child's education.*