CANYONS SCHOOL DISTRICT

# Home School Non-Renewal Form

_____ _____
Student's Name Birth Date

☐ Enrolled full time in Public/Private School
Name of School:_____
☐ Moved from Canyons School District boundaries
Moved to:_____
☐ Aged out of high school

_____ _____
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☐ Moved from Canyons School District boundaries
Moved to:_____
☐ Aged out of high school

_____
Address City State Zip

_____
Parent/Legal Guardian Name (**PRINT**) Phone Number

_____
Parent/Legal Guardian Signature Date

Please Mail, Fax or Email to:
Canyons School District
Student Enrollment
Attn: Teri Hodgkinson
9361 S 300 E Sandy, UT 84070
Fax: 801-826-5054
teri.hodgkinson@canyonsdistrict.org