

Application for Home/Hospital Instruction

(please type or print neatly)

Parent/Student Information

Section I

To be completed by the parent (s) /guardian (s) prior to full completion by the licensed medical or mental health professional.

School District \_\_\_\_\_ School \_\_\_\_\_  
 Grade \_\_\_\_\_ County of Residence \_\_\_\_\_  
 Last Date Attended \_\_\_\_\_ Special Education Student \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_  
 Name of Student \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Address of Student \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Sex \_\_\_\_\_ Race \_\_\_\_\_ Social Security # \_\_\_\_\_ Telephone # \_\_\_\_\_  
 Full Name of Father/Guardian \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Full Name of Mother/Guardian \_\_\_\_\_ Work Phone \_\_\_\_\_  
 List any Special Education Programs in which your son or daughter may be enrolled: \_\_\_\_\_

Directions to Student's Home \_\_\_\_\_

Pursuant to KRS 159.030, Section (2), before granting an exemption under paragraph (d) of subsection (1) of this section, the board of education shall require satisfactory evidence, in the form of a signed statement of a licensed physician, advanced registered nurse practitioner, psychologist, psychiatrist, chiropractor or public health officer, that the condition of the child prevents or renders inadvisable attendance at school or application to study. On the basis of such evidence the board may exempt the child from compulsory attendance. Eligibility for home/hospital instruction for students with disabilities shall be determined by the Admissions and Release Committee (ARC) in accordance with their Individual Education Program (IEP). In lieu of this application, the ARC chairperson shall provide written notice of this eligibility to the local Director of Pupil Personnel (DPP) for purposes of program enrollment.

Any child who is excused from school attendance more than six (6) months must have two (2) signed statements from two different local health personnel which can be a combination of the following professional persons: a licensed physician, advanced registered nurse practitioner, psychologist, psychiatrist, chiropractor and health officer. If a medical professional certifies that a student has a chronic physical condition unlikely to substantially improve within one (1) year, then the one signed statement is sufficient for services that extend beyond six (6) months. This exception does not apply to students with mental health conditions.

Exemptions of all children under the provisions of subsection (1) (d) of this section must be reviewed annually with the evidence required being updated, except that children with disabilities certified by a medical professional to have a chronic physical condition unlikely to substantially improve within three (3) years may continue to be eligible for home/hospital instruction services, based on the admissions and release committee's (ARC) annual review of documentation to determine if updated evidence is required. Updated documentation of evidence of need for home/hospital services for children with chronic physical conditions shall be provided as requested by the ARC, or at least every three (3) years.

Pursuant to 704 KAR 7:120, the condition of pregnancy is not to be considered a physical or health impairment in and of itself, and the nature and extent of any complication shall be delineated prior to consideration of home/hospital instruction for this condition.

RELEASE OF INFORMATION

I understand that the Home/Hospital Review Committee may request a review of the information provided on these forms by local health personnel. I hereby authorize this committee to have access to pertinent information regarding this request.

\_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_