

FLORIDA DEPARTMENT OF EDUCATION

Office of Independent Education and Parental Choice



PUBLIC SCHOOL DISTRICT PARENTAL NOTIFICATIONS

Family Empowerment Scholarship Notification Verification Form



District: _____

SECTION I – April 1 Notification Requirement

1. How did you notify parents by April 1 of this year? Please check all methods that were used.

- Letter/Postcard in Mail Newsletter/Flyer Sent Home with Students
 Telephone Call Electronic Message or Website (may only be used
in conjunction with another method)
 Other (please specify): _____

2. What date(s) were the notifications distributed? _____

SECTION II – Contact Information and Signature

Please provide the name of the person who will be assisting parents with the Family Empowerment Scholarships. Contact information for this person will be listed on the School Choice website for parents.

Scholarship Contact Name	Email Address	Phone
_____	_____	_____
Signature	Title	Date

By my signature below, I verify that our district has complied with the parental notification requirements of section 1002.394(6)(a), Florida Statutes.

Director's Signature _____

Date _____

By Monday, April 13, 2020, please sign and fax this form to the Office of Independent Education and Parental Choice to the attention of Joy Mathis at **850-245-0875**.