



# School District of Okeechobee County

863-462-5000

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Okeechobee, Florida 34974

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**Chairperson**  
Amanda Riedel  
**Vice Chairperson**  
Melisa Jahner  
**Members**  
Joe Arnold  
Jill Holcomb  
Malissa Morgan

## Florida Home Education Annual Evaluation Form

Date: \_\_\_\_\_

Students Full Name: \_\_\_\_\_

Student DOB: \_\_\_\_\_

Students Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Additional Comments:

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Upon reviewing and evaluating the above named Student, I find that he/she has demonstrated progress at a level commensurate with his/her ability and is ready to continue instruction at the next level.

Signature of Certified Teacher: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Florida Certification Number: \_\_\_\_\_

Date Certification Expires: \_\_\_\_\_