

Superintendent
Ken Kenworthy

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Okeechobee County School Board

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

Florida Home Education Annual Evaluation Form

Date: _____

Students Full Name: _____

Student DOB: _____

Students Address: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Additional Comments:

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: _____



Together, Achieving Excellence: Putting Students First!





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