Request for Homebound Tutoring

When requesting Homebound Tutoring, please complete this form and send with the requested documentation to Virginia Haines via Charlene Hubbard (crhubbard@mcps.k12.mt.us).

School Name: ______________________________________________________________________

Student’s Name: _________________________________ Date of Birth: _______________________

School Contact Person___________________________________ Phone_______________________

For Homebound Tutoring to be considered, the following information must be included, along with this form signed by the principal:

1. If the student has an IEP:
   - [ ] Homebound Tutoring for Health Reasons form
   - [ ] IEP amendment including the signature page with parent approval from the IEP

2. If the student has a current 504 plan:
   - [ ] Homebound Tutoring for Health Reasons form
   - [ ] Amended 504 plan

3. If the student has a physical or mental condition that interferes with his/her ability to learn and the condition is projected to last longer than six (6) months
   - [ ] Homebound Tutoring for Health Reasons form
   - [ ] Completed 504 plan

4. If the student has a physical or mental condition that is projected to last six (6) months or less
   - [ ] Homebound Tutoring for Health Reasons form

5. If a parent or school staff member suggests the need for homebound services
   - [ ] Homebound Tutoring for Health Reasons form
   - [ ] IEP amendment or 504 plan/amendment if applicable

___________________________________________________ _____________________________
Principal Signature       Date

Questions?
1. Refer to the Homebound Tutoring Procedures
2. Contact Ginny Haines (vjhaines@mcps.k12.mt.us)

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