

# FLORIDA DEPARTMENT OF EDUCATION

Office of Independent Education and Parental Choice



## PUBLIC SCHOOL DISTRICT PARENTAL NOTIFICATIONS



### Opportunity Scholarship Program Notification Verification Form (IEPC OSP-1) – June 2012

District Name: \_\_\_\_\_

Eligible Schools: \_\_\_\_\_  
\_\_\_\_\_

#### SECTION I - Notification

1. How did you notify parents of eligible students about the available OSP public options?

Please check all methods that were used.

- Letter in the Mail                       Letter Sent Home with Students  
 Telephone Call                               Other: \_\_\_\_\_

2. How many parents did you notify? \_\_\_\_\_

3. What date(s) were the notifications distributed? \_\_\_\_\_

#### SECTION II – Placement

1. How many students requested a transfer to a higher performing public school (grade C or better) in your district? \_\_\_\_\_

2. How many of these students were granted a transfer? \_\_\_\_\_

3. How many students (if any) transferred to a higher performing public school in an adjacent district?  
\_\_\_\_\_

4. How many students (if any) were not able to be placed? \_\_\_\_\_

Please include an explanation on school district letterhead for any students requesting a transfer that were unable to be placed.

#### SECTION III – Certification

The signatures below serve as verification that our district has complied with the parental notification requirements of Section 1002.38(3)(a), Florida Statutes.

_____	_____	_____
OSP Contact Name	OSP Contact Signature	Date
_____	_____	_____
Superintendent Name	Superintendent Signature	Date

Please complete, sign, and fax this form to the attention of **Opportunity Scholarship Program**, the Office of Independent Education and Parental Choice at **(850) 245-9134**.