

**ACKNOWLEDGEMENT OF OPTION TO EXEMPT ATTENDANCE  
OF CHILD FIVE OR SIX YEARS OF AGE FROM SCHOOL**

Pursuant to Section 10-184 of the Connecticut General Statutes,

I, \_\_\_\_\_, of \_\_\_\_\_  
**(Name of Parent, Guardian or Other)** **(Address)**

the parent, guardian, or other person charged with the care of the following minor child,

\_\_\_\_\_, of \_\_\_\_\_  
**(Name of Child)** **(Address)**

born on \_\_\_\_\_, do hereby choose not to send my child to public  
school during the \_\_\_\_\_ school year.  
**(School Year)**

Furthermore, before signing this form a representative of the \_\_\_\_\_  
**(Name of School District)**

school district met with me and provided me with information concerning the educational  
opportunities and school accommodations available in the school system.

**Please check all choices that apply to your child:**

- My child will attend a preschool program for 2024-2025
- My child will attend kindergarten at a private school for 2024-2025
- My child will attend kindergarten at a magnet school for 2024-2025
- I plan to enroll my child in kindergarten with Simsbury Public Schools in 2025-2026
- I plan to enroll my child in Grade 1 with Simsbury Public Schools in 2025-2026
- Other \_\_\_\_\_

**Acknowledged by:**

**Received by Simsbury Public Schools**

**(Signature of Parent or Guardian)**

\_\_\_\_\_

\_\_\_\_\_

**(Date)**

**(Date)**

Please return this form to Laura Shellman at the Simsbury Board of Education Office  
only if you **will not enroll** your child  
in Simsbury Public Schools for the 2024-2025 school year.