



HOME INSTRUCTION

POLICY #: G-2

AUTHORITY: 99-06/12-06

POLICY STATEMENT

The Northeastern Catholic District School Board (NCDSB) is committed to providing a quality, Catholic education to all of its registered students. The NCDSB also recognizes that from time to time, school attendance may be impossible for a student in the case of serious illness or injury. As such, a student may be eligible for home instruction in order to access fundamental elements of academic programming to support continued achievement of the Ontario Curriculum.

REFERENCES

- Regulation 298 , subsection 11(11)

DEFINITIONS

Home Instruction:

When a teacher is made available to provide a student with instruction at home, in a hospital, or a mutually agreed upon venue.

POLICY REGULATIONS

1. Medical evidence shall be supplied by the parent or guardian of the student to the principal confirming the reason why the student cannot attend school.
2. The principal must be satisfied that home instruction is required.
3. The principal shall submit to the appropriate superintendent a request to cause homeinstruction to be provided.
4. The principal of the school in which the student is enrolled shall supervise the work of the teacher employed for the purpose of home instruction and shall establish a time for periodic conferences between the home instruction teacher and the regular classroom teacher.
5. Every student given home instruction shall receive a minimum of ten (10) hours of instruction each week (in at least three sessions).
6. Home instruction shall not be given on those days designated as school holidays on the Board's School Year Calendar.
7. It is understood that the provisions of Home Instruction are a temporary measure to assist a student in making the transition back to regular school attendance.
8. The provision of Home Instruction for a student shall be limited as indicated in Regulation 298 subsection 11 (11) School Attendance Register.

101 Spruce St. N.
 Timmins, ON P4N 6M9
 Phone: (705) 268-7443
 Fax: (705) 267-3590
 Toll Free : (877) 422-9322
 www.ncdsb.on.ca



NORTHEASTERN CATHOLIC DISTRICT SCHOOL BOARD

PARENT / GUARDIAN FORM HOME INSTRUCTION

Name of Student	
Date of Birth	
Name of School	
Name of Principal	
Name of Parent/Guardian	
Home Telephone	
Address	

Dear Superintendent of Education,

I am requesting that my child, _____ (child's full name) be enrolled in a Home Instruction program with the Northeastern Catholic District School Board.

X

Signature: Parent/Guardian

101 Spruce St. N.
Timmins, ON P4N 6M9
Phone: (705) 268-7443
Fax: (705) 267-3590
Toll Free : (877) 422-9322
www.ncdsb.on.ca



NORTHEASTERN CATHOLIC DISTRICT SCHOOL BOARD

MEDICAL CERTIFICATE FOR HOME INSTRUCTION

I have attended to _____ (child's full name)
and find that because of _____
(diagnostic) he/she will be confined to his/her home for _____
weeks and may qualify for a Home Instruction program.

Physician's Name: _____

Physician's Signature: _____

Telephone Number: _____

Address: _____

This certificate is required prior to the commencement of a Home Instruction Program.

Any costs related to the completion of this form is related to the patient.

Note:
The legal authority for the collection of this information is the Education Act. The Board uses the information for the purpose of carrying out its responsibilities under the Act.
If you require information about the collection of this information, contact a Personal Information Management team member at 705.268.7443.