

## Hope Scholarship Notification Form

Pursuant to section 1002.40, Florida Statutes, the Hope Scholarship Program provides a public school student who was subjected to an incident of violence or bullying at school the opportunity to transfer to another public school with capacity or request a scholarship to attend an eligible private school.

By completing and signing this form, the principal is confirming that the incident was reported and that the parent is aware of the educational opportunities under the Hope Scholarship Program. The school should retain a copy and provide original document to the parent.

### Student Information

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
FLEID: \_\_\_\_\_ Grade Level: \_\_\_\_\_  
School of Enrollment and MSID: \_\_\_\_\_ School District: \_\_\_\_\_

### Incident Information

Date and Time of Incident: \_\_\_\_\_ Date Incident Reported: \_\_\_\_\_  
Place Incident Occurred:  School playground  
 School classroom  
 School cafeteria  
 School hallway  
 School restroom  
 On a school bus  
 At a school bus stop  
 At a school related/sponsored program or activity  
 Other school location (please specify): \_\_\_\_\_  
Incident Type:  Battery  
 Harassment  
 Hazing  
 Bullying  
 Kidnapping  
 Physical Attack  
 Robbery  
 Sexual offense  
 Threat or intimidation  
 Fighting

### Confirmation of Hope Scholarship Notification

Principal or Designee Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

To transfer your student to another public school please contact your school district office.

For more information on how to apply for the private school option, please visit [www.floridaschoolchoice.org](http://www.floridaschoolchoice.org).