

## 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).