

**MOUNCE, GREEN, MYERS,
SAFI, PAXSON & GALATZAN**
A PROFESSIONAL CORPORATION
ATTORNEYS AND COUNSELORS AT LAW

S. ANTHONY SAFI
H. KEITH MYERS
CARL H. GREEN
JOHN S. BIRKEBACH
KURT G. PAXSON
NORMAN J. GORDON
STEVEN L. HUGHES
MARK D. DORE
CLYDE A. PINE JR.
BRUCE A. KOEHLER
STEPHEN H. HOCKEY
DARRYL S. VEREEN
ANDRES E. ALMANZAN
RAYMOND BENAVIDES II

ANGELICA A. SAENZ
ELIZABETH MELBY RUHMANN
BELINDA A. MAY
JOSE C. VEGA*

WILLIAM J. MOUNCE
OF COUNSEL

MORRIS A. GALATZAN
(1911-1999)
WILLIAM F. KIRK
(1940-2002)

TELEPHONE: (915) 532-2000

MAILING ADDRESS:
P.O. BOX 1977
EL PASO, TEXAS 79950-1977

STREET ADDRESS:
100 N. STANTON, SUITE 1700
EL PASO, TEXAS 79901-1448

FACSIMILE: (915) 541-1548

WEBSITE: WWW.MGMSG.COM

* ALSO MEMBER OF NEW MEXICO BAR

September 12, 2008

Mr. Tim Lambert, President
Texas Home School Coalition Association
P. O. Box 6747
Lubbock, Texas 79493

Re: My Client: El Paso Independent School District

Dear Mr. Lambert:

I have been asked to correspond with you regarding your letter dated August 20 addressed to Oscar Ontiveros, Principal at the Dr. Nixon Elementary School in the EPISD.

I thought I would enclose for you the withdrawal form that Mrs. H_____ was asked to sign. This is a form used by the School District for its records when a minor student is withdrawn at the request of the parent. It is my understanding that a form like this was delivered to Mrs. H_____ by an EPISD employee, but the person delivering the form was not a truant officer.

You are correct in stating that, from the legal perspective, Mrs. H_____ can effectuate the withdrawal of her child by giving written notice. The School District would prefer, for the purposes of its own record-keeping, that the enclosed form be signed. We would ask you to consider requesting Mrs. H_____ to sign it, but please be assured that there will be no adverse consequence to her if she declines. We would welcome any questions or comments that either you or Mrs. H_____ may have concerning this form.

Also, I am enclosing herewith a Home-Schooling Notification Form. This helps to provide assurance to the School District that the parent is home-schooling the child using a curriculum that meets the basic requirements of the *Leeper* case. Again, we request that you forward this to Mrs. H_____, and request that she fill it out with as much of the information

ALFA.
*American
Law Firm
Association*

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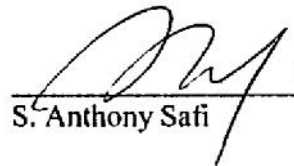
as is known to her, sign it, date it, and return either to me or to Mr. Mark Mendoza, the Director of Pupil Services at the School District.

Please be assured that it has not been the intent of the School District to cause undue concern to Mrs. H_____ ; it is simply trying to discharge its obligation to ensure that those school-aged children within its jurisdiction are being educated – in one of its schools, at home, or otherwise – within the requirements of the law. Again, please feel free to contact me should you have any questions or comments in this regard.

Sincerely,

MOUNCE, GREEN, MYERS, SAFI,
PAXSON & GALATZAN
A Professional Corporation

By:


S. Anthony Safi

SAS/mh

Enclosures

cc: Mark Mendoza
Director, Pupil Services

El Paso Independent School District

PUPIL SERVICES DEPARTMENT

HOME SCHOOLING

HOME-SCHOOLING NOTIFICATION FORM

Student Last Name	First Name	ID Number (if A CURRENT STUDENT)	Campus
Address	City State	Zip Code	Date of Birth
Grade			

PARENT CERTIFICATION

I, _____ the parent/guardian of _____
(full name of student to be home schooled) am notifying the El Paso Independent School District that I am home-schooling my child.

The curriculum that I am using includes the following: reading, spelling, grammar, mathematics, and a study of good citizenship. I am aware that all supplies and books will not be provided by the El Paso Independent School District.

Signature of Parent, Guardian, or Responsible Person	Date
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Original: Cumulative Folder

Copy: Pupil Services/Senior Attendance Clerk

Please contact the director for pupil services at 881-2460 if additional information is needed.

El Paso Independent School District

9/3/2008

Nixon Elementary School

11141 Loma Rnja El Paso, TX 79934

Phone:

Fax:

Instructions:

1. Have all teachers sign this withdrawal form.
2. Obtain all other clearance signatures.
3. Return this form to the Registrar's Office when complete.

Name:	Benjamin Caleb Holliday	Local ID:	429451
Address:		State ID:	629705345
		Phone:	
Grade Level:	05	Gender:	M
Ethnicity:	Hispanic	D.O.B.:	1/20/2000
Parent/Guardian:			
Entry Date:	8/23/2008	Withdrawal Date:	8/23/2008
Reason for W/D:			
If Moving, Where?:			
Name of Receiving School:			
Address of Receiving School:			

Total Official Absences to Date:

Special Education:	Yes	X	No	
Speech Therapy:	Yes	X	No	
Instructional Settings:	Yes	X	No	
Primary Handicap Condition:	Yes	X	No	
ESL:	Yes	X	No	Home Language:
Bilingual:	Yes	X	No	English
Bilingual/ESL Summer School:	Yes	X	No	
Gifted/Talented:	Yes	X	No	
Free/Reduced Lunch Status:	Yes	X	No	
Migrant Status:	Yes	X	No	
SN4:	Yes	X	No	
At-Risk:	X	Yes	No	

TAKS Scores:	English:	Math:	Science:	See Studies:
Attendance Clerk:				
Cafeteria Manager:				
Library Record Clerk:				
Librarian:				
Counselor:				
Registrar:				
Parent's Signature:	Date:			
Nurse:				
Does Student Plan To Continue His/Her Education:	Yes	No		
If "Yes", please indicate:	Private:	Home:		
	Public:	Office:		