Home School Supplement

You may leave all school contact information (bottom of page 2) blank if you are stapling this Home School Supplement to the School Report before mailing. Please type or print in black ink. This form should only be used by home school supervisors. Check specific college information in our online Requirements Grid to ensure a member institution uses this form. ***Do not mail this form to The Common Application offices.***

TO THE APPLICANT

Legal Name _____
Last/Family/Sur (Enter name **exactly** as it appears on official documents.) First/Given Middle (complete) Jr., etc.

Birth Date _____ CAID (Common App ID) _____
mm/dd/yyyy

Address _____
Number & Street Apartment # City/Town State/Province Country ZIP/Postal Code

School you now attend _____ CEEB/ACT Code _____

TO THE HOME SCHOOL SUPERVISOR

Philosophy

Please provide any information about the applicant's home school experience and environment that you believe would be helpful to the reader (e.g. educational philosophy, motivation for home schooling, instruction setting, etc.).

Grading Scale

Please explain the grading scale or other methods of evaluation.

Outside Evaluation

If the student has taken courses from a distance learning program, traditional secondary school, or institution of higher education, please list the course title and content, sponsoring institution, instruction setting and schedule, and frequency of interactions with instructors and fellow students (once per day, week, etc.). **In addition**, if the student has taken any standardized testing other than those listed on page 2 of the Common Application, please also describe below.

Transcript

Subject	Course Title & Level (AP/College)	Date (To/From)	Grade	Primary Text Used
English	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Math	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Science	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Social Studies	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Foreign Language	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Arts	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Other	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

Supervisor's Name (Mr./Mrs./Ms./Dr.) _____
Please print or type

Signature ✎ _____ Date _____
mm/dd/yyyy

Supervisor's Address _____
City/Town   State/Province   Country   ZIP/Postal Code

Supervisor's Phone (_____) _____ Supervisor's Fax (_____) _____
Area Code   Number   Ext.   *Area Code   Number*

Supervisor's E-mail _____

Are you a member of a homeschooler's association? ○ Yes ○ No If yes, name of association _____