

HOME SCHOOL SUPPLEMENT

HS

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		(Enter name exactly as it appear		First/Given	Middle (complete)	Jr., etc.					
Birth Date _		mm/dd/yyyy		CAID (Common App ID)_							
Address	Number & Street	Apartment #	City/Town	State/Province	Country	ZIP/Postal Code					
School you now attend				CEEI	3/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.

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Transcript

Subject	Course Title & Level (AP/College)	Date (To/From)	Grade	Primary Text	Used			
English								
Moth								
Math								
Science								
Social								
Studies								
								
								
Foreign Language								
Languago								
Arts								
								
0								
Other								
Supervisor's Na	ame (Mr./Mrs./Ms./Dr.)	it or type						
Signature <u></u>				Data				
Signature_ <u></u>				Date	mm/dd/yyyy			
Supervisor's A	ddress							
		Town State/Pr		ountry ZIP/Post	al Code			
Supervisor's Pl	none ()	Supervisor's Fax	() _ Area Code	Number				
	-mail							
Are you a member of a homeschooler's association? O Yes O No If yes, name of association								

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