



HOME SCHOOL SUPPLEMENT

APPLICANT

Legal Name _____ *Last Name* *First Name* *Middle Name* ☐ Female ☐ Male

Date of Birth _____ / _____ / _____ Social Security Number _____ - _____ - _____
Month *Day* *Year*

Home Phone Number _____ / _____ Cell Phone Number _____ / _____

Grading Scale

Please explain the grading scale or other methods of evaluation.

Additional Courses

If the student has taken courses from a distance learning program, traditional secondary school, or institution of higher education, please detail them here. In addition, if the student has taken any standardized testing other than those listed on your student's application, please also describe below.

If you feel that your student's application would be better served through a teacher / tutor recommendation, you are welcome to waive the Counselor Recommendation by submitting a statement below. The wording for this statement can be found at smu.edu/apply/homeschool.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Coordinator's Name _____

Coordinator's Phone Number _____ / _____ Coordinator's Fax Number _____ / _____

Coordinator's Email Address _____

Coordinator's Address _____				
<i>House Number and Street</i>		<i>City</i>	<i>State</i>	<i>ZIP Code</i>

Are you a member of a home school association? ☐ Yes ☐ No If yes, name of association: _____

Coordinator Signature _____ Date _____