



APPLICANT'S INFORMATION

FIRST NAME MIDDLE LAST PREFERRED NAME

HOME STREET ADDRESS

CITY

STATE

ZIP

HOME SCHOOL SUPPLEMENT

Students: Please complete the top section, and let your Home School Supervisor complete the remainder.

Please type or print in black ink. This form should be submitted by the application deadline.

Please email this form to admission@agnesscott.edu, fax to 404.471.6414 or mail to:

Agnes Scott College
Office of Admission
141 E. College Ave.
Decatur, GA 30030-3797

For questions, contact the Office of Admission at 404.471.6285; toll free at 800.868.8602, ext. 6285 or admission@agnesscott.edu.

TO BE COMPLETED BY 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 the Common Application, please also describe below.

Transcript

Subject	Course Title & Level (AP/College)	Start Date (MM/DD/YYYY)	End Date (MM/DD/YYYY)	Grade	Primary Text Used
English					
Math					
Science					
Social Studies					
Foreign Language					
Arts					
Other					

SUPERVISOR'S INFORMATION

NAME

ADDRESS (CITY/TOWN, STATE/PROVIDENCE, COUNTRY)

PHONE

FAX

EMAIL

HOMESCHOOLER'S ASSOCIATION (IF APPLICABLE)