

HOMESCHOOL FORM

Lakewood College - REGISTRAR

12900 Lake Avenue, Suite 003A • Lakewood, OH 44107 •

Phone: 1-800-517-0857 • FAX: 216-803-9899

Student Name _____ Student Number _____

Telephone Number where you may be reached during the day _____ Date _____

Name of teacher _____ Relationship _____

Teacher's credentials _____ Teacher's signature _____

Course Name	Grade Level	Year Taken	Final Grade	Textbook Title	Publisher/Copyright Date	Portfolio or Exam
<i>Example: General Math</i>	9	95-96	B	<i>Refresher</i>	Steck-Vaugh/1995	Exam

You must provide the following information for all courses taken in your homeschool program. Each course must be listed separately. You must attach the course outline and/or textbook's table of contents for each course.

Please make a copy of this form if you need more space to describe your educational experience.