

## **Columbus Campus Student Central** Madison Hall

550 E. Spring St., Columbus, OH 43215 (614) 287-5353 Fax: (614) 287-6112

**Delaware Campus Student Services**Moeller Hall
5100 Cornerstone Dr., Delaware, OH 43015
(740) 203-8345

## **OUT-OF-STATE**

## **Home School Graduation Self-Certification Form**

Student Name: \_\_\_\_\_ Cougar ID: \_\_\_\_\_

	List Cougar ID# on all attachments.
To receive federal student aid, a student who completed high schoolsubmit the following documentation:	ool in a home-school setting mus
1. Official Home School Transcript includes the following information	on:
<ul> <li>Student Name</li> <li>Date of Birth</li> <li>Student Address</li> <li>Name of Home School with Address (Street, City,</li> <li>Courses taken (listed by grade level and year come</li> <li>Grade for each course</li> <li>Cumulative Grade Point Average</li> <li>Date of Home School Graduation</li> <li>Dated Signature of the person designated as the limited</li> </ul>	npleted)
2. This completed and signed OUT-OF-STATE Home School Grade	uation Self-Certification Form
Please submit this completed form with the transcript to: high	nschooltranscript@cscc.edu
If you prefer to submit in person, deliver to: Student Central, Madison Hall or Moeller Hall Columbus Campus Delaware Ca	Student Services ampus
*If you need to mail your transcript along with your required supporting docume the header of this letter.	ent, please use the Columbus address in
<u>Certification</u>	
I,, certify that (Printed Student Name) school education in a homeschool setting that qualifies as an exer attendance requirements in my home state.	t I have completed a secondary
Student Signature (Required)	Date
Print Name of Parent or Certifying Home School Official (Required)	
Parent Signature or Certifying Home School Official (Required)	 Date