

ADMINISTRATOR AND ACCORDANCE STATEMENT

Return the completed form to **ec-processing@ncaa.org**. Incomplete forms will not be used. I served as the homeschool administrator for:

Student Name:	NCAA ID:
I administered the homeschool program in the followard Taught the courses.	wing ways (check all that apply):
\square Evaluated the coursework.	\square Managed the homeschool program.
Homeschool Administrator Name:	
Email:	Phone:
Signature:	
Relationship to Student (check one): \Box Parent	
If other, please explain:	
Homeschool Umbrella Program Name (if applicable):	
Homeschool Umbrella Program Email (if applicable):	
I affirm that the homeschool was conducted in compliance with the laws of the state of I am able to provide supporting documentation.	
I affirm that student above was homeschooled for grade(s) (check all that apply):	
□ 9th □ 10th □ 11t	h □ 12th
Start of Ninth Grade: This date should reflect when the student started ninth grade,	
regardless of where the student was attending ninth grade (mm/dd/yyyy):	
I affirm that I have reviewed and determined that all homeschool transcripts and the information contained within are accurate, whether created by a parent/guardian and/or homeschool umbrella program.	
Printed Name:	Date (mm/dd/yyyy):
Parent/Guardian Signature:	

Note: All submitted documents must come from an email listed on this form.