

DEPAUW

COLLEGE OFFICIAL'S REPORT

Spring Semester Application deadline January 10 • Fall Semester Application deadline June 10

After completing the questions below, give this form to the Dean of Students (or his/her designee) at the school from which you are transferring. Please note that we will not consider students who are on probation or ineligible to return to any college or university. We ask that you give a complete account of your reasons for leaving your present school and your desire to transfer to DePauw.

Applicant Section

LAST/FAMILY/SURNAME	FIRST/GIVEN	MIDDLE (SPELL OUT)	(JR., ETC.)
NUMBER AND STREET, APT. #, ETC.			
CITY	STATE/PROVINCE	ZIP/POSTAL CODE	COUNTRY
CURRENT OR MOST RECENT COLLEGE ATTENDED		DATES OF ATTENDANCE	
MAJOR FIELD OF STUDY			

What are your reasons for transferring? _____

Are you in good standing at the last college you attended and eligible to return? Yes No

If not, please explain. _____

Under the 1974 Family Educational Rights and Privacy Act, an applicant who is admitted and enrolls has the right to review his/her educational files including recommendations such as this. To obtain confidential recommendations for the purposes of admission and academic counseling only, it is possible to waive one's right of access. If you wish to voluntarily waive your right of access to this document, sign the following release. If you have questions about this waiver, please discuss its implications with your counselor.

I will not seek access to this confidential recommendation submitted on my behalf for the purpose of admission and counseling.

SIGNATURE DATE

Dean of Students Section (to be completed by the Dean or his/her designee)

LAST/FAMILY/SURNAME	FIRST	MIDDLE	(JR., ETC.)
NUMBER AND STREET	CITY	STATE/PROVINCE	ZIP/POSTAL CODE
() OFFICE TELEPHONE	() FAX NUMBER		E-MAIL ADDRESS

If this student wished to continue at your school, is he/she eligible to do so? Yes No *If not, why not?*

Has the student ever incurred disciplinary action? Yes No *If yes, please explain.*

I endorse this applicant for admission enthusiastically.

I endorse this applicant for admission.

I endorse this applicant for admission with reservation.

SIGNATURE	POSITION	DATE
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DEPAUW

OFFICE OF ADMISSION

101 E. Seminary St. • P.O. Box 37 • Greencastle, IN 46135-0037

www.depauw.edu