

Statement of Good Standing for Transfer Students

The completion of this form is necessary for transfer application to Berea College. Please fill in your name, address, and dates of attendance on this form. Submit a copy of this form to the Office of the Dean of Students at all institutions that you have attended previously. Please ask them to forward this completed form directly to the Berea College Office of Admissions, CPO 2220, Berea, KY 40404.

To the Transfer Student:

After completing this section, please give a copy of this form to the Dean of Students of all of the colleges or universities you have attended previously.

Name: _____ Date of Birth: _____

Permanent Home Address: _____

City: _____ State: _____ Zip: _____

The Family Educational Rights and Privacy Act of 1974, as amended, guarantees confidentiality of the student's educational records.

In an effort to expedite my transfer, I _____ authorize the Dean of Students Office to release all information as it pertains to my conduct and code of behavior.

Name of Institution: _____ Dates Attended: _____

Signature: _____ Date: _____

To the Dean of Students:

This statement is to verify that the above student is in good academic and disciplinary standing at your institution. Please mark the appropriate responses:

Full name of student: _____ is a student in

- Good standing
- Probationary standing

- | | | |
|--|------------------------------|-----------------------------|
| 1. Has this student ever been dismissed from your institution? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. Has this student ever been subject to disciplinary action? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Is this student eligible to return to your institution? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If the answers to (1) or (2) are yes or the answer to (3) is no, please explain below. You may continue on the reverse side of this form, if needed. Thank you.

Name: _____

Signature: _____ Date: _____

Title: _____

Phone: _____ Email: _____

