



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 Office of 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 Office of the Dean of Students to release all information as it pertains to my conduct as an enrolled student.

Name of Institution _____ Dates Attended _____

Signature _____ Date _____

TO THE OFFICE OF THE DEAN OF STUDENTS:

This student has applied to transfer to Berea College. Will you, or a member of your staff who has access to the student's records, please complete this form? Your assistance is greatly appreciated.

_____ (Full name of student) is a student in Good standing Probationary standing

- 1. *Has this student ever been dismissed from your institution?* Yes No
- 2. *Has this student ever been subject to disciplinary action?* Yes No
- 3. *Is this student eligible to return to your institution?* Yes 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 _____ Title _____

E-mail address _____ Phone _____

Signature _____ Date _____