

# Washington College



## COLLEGE & UNIVERSITY REPORT

### APPLICANT

After filling in the following information, please give this form to your Dean of Students:

Name: \_\_\_\_\_ Soc. Sec. #: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

College/University: \_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

I authorize the release of this information to the Washington College Admission Office.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### DEAN OF STUDENTS

The above-named student is applying for transfer admission to Washington College. Please respond to the following questions and return this form to the Washington College Admission Office as soon as possible; the information will be held in strict confidence. Thank you for your assistance.

#### THE FOLLOWING INFORMATION IS BASED UPON:

Records on file

Close personal acquaintance

Casual contacts and observations

#### TO YOUR KNOWLEDGE HAS THE STUDENT:

Been responsible for disruptive or disorderly behavior?

Yes No

Been involved in acts of dishonesty?

Demonstrated unsatisfactory adjustment to college or fellow students?

Experienced any physical or psychiatric disability requiring treatment?

Been placed on probation of any kind? (If yes, please explain)

Is the student presently in good standing and eligible to return to your college/university? (If no, please explain)

Please provide any additional commentary which would assist the Admission Committee in making a decision: