



College Transfer Recommendation Form

This form is needed to complete the application process for Wilmington College. Please have the Dean of Students (or comparable official) at your last college or university complete and return this to the Office of Admission at Wilmington College.

I, _____, authorize the release of this information. _____
Name of Student (please print) Date

(Student's Signature)

(Student's Social Security Number)

Memorandum to Dean:

The above-named student has applied for admission to Wilmington College. In considering the application, we would appreciate answers to the questions below. Since the student cannot be considered for admission until we receive your evaluation, an early reply would be appreciated. This information will, of course, be considered confidential. Thank you for your assistance.

1. Is this student eligible to return to your school? Yes No

If not, please explain:

2. Has the above student ever been in any disciplinary trouble? Yes No

If YES, please explain:

3. Any additional pertinent information:

Institution

Name of Official

Title

Signature

Please return to:

Wilmington College · Office of Admission · Pyle Center 1325 · 1870 Quaker Way · Wilmington, OH 45177

E-mail: admission@wilmington.edu · Fax: (937) 481-2936