Center for Enrollment

BETHANY COLLEGE • CENTER FOR ENROLLMENT #4 • BETHANY, WV 26032 enrollment@bethanywv.edu • www.bethanywv.edu (304) 829-7611 • FAX: (304) 829-7142

To the Transfer Student:

Bethany

The completion of this form is necessary for transfer application to Bethany College. Please fill in your name, address and dates of attendance on this form. Submit the form to the Dean of Student's Office at the last college or university in which you were enrolled and have it forwarded to the **Center for Enrollment #4**, **Bethany College, Bethany, WV 26032**.

Student's name: _____

Home address: _____

Address other than home: _____

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 Student's Office to release all information as it pertains to my conduct and code of behavior.

Signature of applicant: _____ Date: _____

To the Dean of Student's Office:

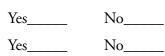
The student has applied for transfer to Bethany College. Please complete this form and return it to: Center for Enrollment #4, Bethany College, Bethany, WV 26032. Your assistance is greatly appreciated.

1. Has this student been dismissed from your institution?

- 2. Has this student been subject to any non-academic disciplinary action?
- 3. Is this student eligible to return to your institution?
- 4. Date student was enrolled: ______ to _____

If the answers to (1) or (2) above are *yes* or the answer to (3) above is *no*, please explain on the reverse side of this form. Thank you.

Your name:Dat	
Your signature:	
Official title:	
Institution:	



Yes_____ No_____