WESTMINSTER COLLEGE

TRANSFER STUDENT CLEARANCE FORM

To the Candidate:

This form is required as proof of your good standing at the college or university from which you intend to transfer. By typing your name below, you are agreeing to release your information to Westminster College. After signing this form give to a student affairs officer at your current college/university to complete it and return it to Westminster. YOUR APPLICATION FOR ADMISSION TO WESTMINSTER WILL NOT BE PROCESSED UNTIL THIS FORM, SIGNED BY YOU, IS COMPLETED AND RETURNED BY THE APPROPRIATE COLLEGE/UNIVERSITY OFFICER.

Print Name:	
Address:	
Signature:	
To the student affairs officer:	
Has the student been involved in any disciplinary proceed yes no If yes, please describe nature of o	
 Has the student ever been suspended from your institutio yes no If yes, please explain. 	n?
 Is the student presently eligible to continue at your institut yes no If no, please explain. 	tion?
Would you care to communicate additional information to yes	me personally?
5. These responses are based upon: records counseling contacts personal acqu	uaintance other
Name	Date
Signature	Title
Institution	Phone
Please mail or email to: Westminster College Office of Admissions 319 S. Market Street	

New Wilmington, PA 16172-0001

admissions@westminster.edu