



TRANSFER STUDENT CLEARANCE FORM

The completion of this form is necessary for transfer admission to the University of New Haven. Please fill in your name, address, and dates of attendance, sign the form, and submit it to the Dean of Students Office at all colleges or universities in which you have been enrolled.

Name of Applicant _____
Last First Middle

Home Address _____
Street City State Zip

Telephone _____ Email Address _____

Institution _____ Dates of Attendance _____

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 Students Office to release all information as it pertains to my conduct and code of behavior.

Signature of Applicant _____ Date _____

TO THE DEAN OF STUDENTS OR OFFICE OF STUDENT CONDUCT:

The student named above has applied for admission as a transfer student to the University of New Haven. **Please complete this form and email to admissions@newhaven.edu.** Your assistance is greatly appreciated.

1. Has this student been dismissed from your institution? Yes No

If yes, please explain briefly _____

2. Has this student been subject to any academic or non-academic disciplinary action? Yes No

If yes, please explain briefly _____

3. Is this student eligible to return to your Institution? Yes No

If no, please explain briefly _____

4. Who may we call for further information? _____ Phone _____

Signed _____ Name _____

Title _____ Institution _____