



## DEAN OF STUDENTS CERTIFICATION AND RECOMMENDATION FORM

**This section is to be completed by the transfer applicant. Please print.**

Please complete the applicant section and submit this form to the Dean of Students at each institution you have attended. Your signature authorizes the release of information regarding your disciplinary record. Failure to submit this form will prevent your application from being reviewed. If you have been involved in disciplinary action at a previous institution, we strongly encourage you to submit a separate statement explaining the incident.

Student's name (last, first, middle) \_\_\_\_\_

Home street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Home number \_\_\_\_\_ Student's cell phone number \_\_\_\_\_

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

**This section is to be completed by the evaluator. Please print.**

This form should only be completed by a campus official who has access to and is authorized to release information on disciplinary records. ***The completed form must be sent directly to the Office of Transfer Admissions, The University of Scranton, The Estate, Scranton, PA 18510.***

1. Has the applicant been the subject of any disciplinary action for conduct at your institution either on campus or off campus? (If yes, please explain on the reverse side or separate sheet of paper.)

\_\_\_\_\_ YES \_\_\_\_\_ NO

2. Has the applicant been suspended, dismissed, expelled or withdrawn from your institution for disciplinary reasons and/or does the applicant have any pending disciplinary matters on file? (If yes, please explain on the reverse side or separate sheet of paper.)

\_\_\_\_\_ YES \_\_\_\_\_ NO

3. Is the applicant eligible to return to your institution?

\_\_\_\_\_ YES \_\_\_\_\_ NO

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

Printed name \_\_\_\_\_ Title \_\_\_\_\_

School \_\_\_\_\_ Phone \_\_\_\_\_

Email address \_\_\_\_\_