

Brandeis University

DEAN'S EVALUATION FOR TRANSFER APPLICANTS

Applicant's Section

This form is for transfer applicants only. Please provide your personal information prior to extending this form to the dean of students or equivalent school official at the institution of your most recent enrollment as a full-time student. Please be sure to type or print in ink.

Last Name		First Name	Middle Initial	Suffix
Date of Birth		Social Security Number (optional)		<input type="checkbox"/> Male <input type="checkbox"/> Female
Permanent Street Address				Apt #
City	State/Province	Postal Code	Country	
Primary Phone Number		Email Address		
College or University		CEEB/ACT Code		

Confidentiality Statement: Under the provisions of the Family Education Rights and Privacy Act (FERPA) you have the right to access your records after you matriculate unless you waive your right to access below:

- I hereby waive my right to access, and I understand I will never see this recommendation.
- I do not waive my right to access and may someday choose to review this recommendation.

Signature

Date

By signing this form, I authorize my school to provide an evaluation and I give permission for the release of my education and conduct records to Brandeis University.

Signature

Date

Dean's Section

Has this student been subject to disciplinary action involving suspension or dismissal from the institution? Yes No
If yes, please explain.

In the space below or on a separate sheet, please list any notable references to the applicant's academic achievement, character, and contribution to the college community.

Signature

Date

Phone Number

Email Address

Please submit this form to Office of Admissions, Brandeis University, 415 South Street, PO Box 549110, Waltham, MA 02454.