

**SOUTHERN VERMONT COLLEGE**

Office of Admission  
982 Mansion Drive  
Bennington, VT 05201  
802-447-6304 Fax: 802-447-4695

**DEAN'S REPORT**  
*Transfer Candidates Only*

**To the Applicant:**

1. Please complete this section, including the waiver statement.
2. Give this report to the Dean of Students of your current (or most recent) college. The Dean should forward this form directly to Southern Vermont College.

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Name of Student \_\_\_\_\_ Social Security No. \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street \_\_\_\_\_

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

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College/University \_\_\_\_\_ Dates Attended \_\_\_\_\_

*Family Education Right and Privacy Act of 1974*

The purpose of this recommendation is to assist in making the admission decision. Under the provisions of this Act, you have the right, if you enroll at Southern Vermont College, to review your educational records.

I waive \_\_\_\_\_ I do not waive \_\_\_\_\_ any right of access that I may have to this recommendation form.

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Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**To the Dean:** The aforementioned student is applying for admission to Southern Vermont College as a transfer student. Please complete this form.

- 1) Was this student in good academic standing at your institution?  
Yes                      No                      If no, explain:
  
- 2) Has this student ever been placed on probation or dismissed from your institution for **academic** reasons?  
Yes                      No                      If yes, explain:
  
- 3) Has this student ever been placed on probation or dismissed from your institution for **disciplinary** reasons?  
Yes                      No                      If yes, explain:
  
- 4) Do you know this student's reasons for wishing to transfer to Southern Vermont College?  
Yes                      No                      If yes, what are they?
  
- 5) Has this student ever earned distinctions or been awarded special honors?  
Yes                      No                      If yes, what are they?
  
- 6) How would you appraise this student's intellectual qualities?
  
- 7) If not currently enrolled, is this student permitted to re-enroll at your institution?  
Yes                      No                      If no, please explain:

**Please mail this form as soon as possible to:**

Southern Vermont College  
Office of Admission  
982 Mansion Drive  
Bennington, VT 05201

\_\_\_\_\_  
Name of College/University Official

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name of College or University

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date