

College reference

To the student: Fill in Section 1 and request the dean of students (or another appropriate officer, such as the academic dean, registrar, etc.) at the college most recently attended to complete Section 2 or 3 and 4 and 5 depending on whether you are a transfer or transient student and return the form to the Admission Office at Goshen College.

Because of the Family Educational Rights and Privacy Act of 1974, this reference will now be accessible to the student if requested. The guidelines recommend that the referee will either discuss the written statement or share its contents with the applicant in an interview.

1. Student information

Name: _____
Last First Middle/Maiden

Address: _____
Street/Route/Post office box City State/Province ZIP/Postal code Country

Date of birth: ____/____/____ Place of birth _____
Mo. Day Yr.

Please check one:

- Transfer student — see (2) below
- Transient Student — see (3) below (currently enrolled in another institution and will return after attending Goshen College)

2. Transfer student reference

- a. Is the applicant on academic probation? Yes No
- b. Is the applicant on suspension? Yes No
- c. Is the applicant now or has been subject to disciplinary procedures or actions? Yes No

3. Transient student reference

To be completed by the registrar of the accredited college where student is currently enrolled. This is to certify that the above student is a matriculant at _____, is eligible to return and may take work at Goshen College. According to our records the student has completed, at all colleges attended, the equivalent of approximately ____ years of full-time study, with a cumulative grade point average of _____ (in which a C average would be expressed as _____.)

4. Recommendation

I recommend this candidate for admission to Goshen College:

	Not Recommended	Without Enthusiasm	Fairly Strongly	Strongly	Enthusiastically	School Policy Precludes Recommendation
For academic promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For character and potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Comments

Please use space provided or additional pages. Your written comments are valuable to our Admission Committee.

Name: _____ Position: _____

College or university: _____ Date: _____

Return completed form to:

Goshen College Admission Office • 1700 South Main St., Goshen, IN 46526
 Toll free: (800) 348-7422 • Phone: (574) 535-7535 • Fax: (574) 535-7609
 E-mail: admission@goshen.edu • www.goshen.edu

