

Antioch College Office of Admissions 795 Livermore Street Yellow Springs, Ohio 45387 Telephone: 1-800-543-9436

(toll free outside 937 area code) (937) 767-6400

(collect inside 937 area code) Fax: 1-(937)-767-6473

e-mail: admissions@antioch-college.edu

Dean's Reference

Supplementary Information for Transfer Applicants Only

(Please print or type)

TO THE STUDENT: Please complete the section below and then have the Dean of Students at your most recent college or university complete and return this form. Your application for admission will not be reviewed without this supplementary information.

| Name | | | | | | | | |
|-----------------------|--|-------------------|--------------|--------------------|----------|----------|-------------|------------|
| last | | | first | | | middle | | |
| Like to be called (| nickname) | | | Date of | Birth | | | |
| | | | | | | mo. | day | year |
| Mailing Address _ | number and | | | | | | apartment | |
| | | | | | | | -F | |
| · | city | | state | | zij | p | | |
| Home Telephone | area code / phone numl | | | | | | | |
| | area code / phone numb | ber | | | | | | |
| Present Or Most F | Recent Institution Attended | | | | | | | |
| Dates Attended: | from | to | | Degree Candidate | ☐ yes | □ no | | |
| Other Colleges or | Universities Attended | | | | | | | |
| | permission for the release of cant | | | • | | | | |
| Please complete th | OF STUDENTS: The above is form and return it to: One is not considered part of the | ffice of Admissio | ons, Antioch | College, 795 Liver | more St. | , Yellow | Springs, Ol | nio 45387. |
| 1. Is this student of | currently enrolled at your in | astitution? | yes 🗖 no | | | | | |
| 2. Is the candidate | e in good academic standing | g? 🔲 yes 🗆 | no no | | | | | |
| If not, please e | xplain: | | | | | | | |
| 3. Are you aware | of the reason this student w | | | □ no | | | | |
| If so, please sta | ate your understanding of th | e reason. | | | | | | |
| | | | | | | | | |

| 4. | Is the student eligible to return to your institution? \square yes \square no |
|-----|--|
| 5. | Has the student left your school for any reason other than graduation (such as probation or dismissal from your school for academic or other reasons)? |
| | If so, please explain the circumstances and the nature of the action taken. |
| 6. | Please explain any particular contributions the student has made to the nonacademic life at your school. |
| | |
| 7. | Please use this space for any additional comments about this student. |
| | |
| Ρlα | ease print your name: |
| | tle: |
| Ph | one number: |
| Tł | is report is based upon: records and reports casual contacts close personal acquaintance |
| Si | gnature: Date |