

HARTWICK COLLEGE
Oneonta, New York
888-HARTWICK / 607-431-4150
Fax: 607-431-4154
Financial Aid: 607-431-4130

PROFESSOR EVALUATION

FOR TRANSFER STUDENTS ONLY

DEADLINE (CHECK ONE): ☐ Fall Term, August 1 ☐ Spring Term, January 1

TO THE APPLICANT

After you have filled in the lines below (please type or print in black ink), give this to a faculty member from whom you have taken an academic course within the past two years. We suggest you provide a stamped envelope addressed to: Office of Admissions, Hartwick College, Oneonta, NY 13820.

<i>Last name of applicant</i>	<i>First</i>	<i>Middle (complete), Jr. etc.</i>	
<i>Permanent home address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

TO THE PROFESSOR

This student is applying for transfer admission to Hartwick College. Your candid evaluation of academic performance and future promise will help the admissions staff reach a decision. Additionally, we would like to know about the student's personal qualities and attributes. Please return this completed form by the date indicated above to: Office of Admissions, Hartwick College, Oneonta, NY 13820.

<i>Professor's Name</i>	<i>Title/subject area</i>		
<i>College</i>			
<i>College Address</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

How long have you known the applicant?

List the courses you have taught this student, noting for each the student's year in college and the grade the student received.

We welcome any additional comments. Attach a separate page if necessary.

<i>Signature</i>	<i>Date</i>
------------------	-------------

CONFIDENTIALITY In accordance with the Family Educational Rights and Privacy Act of 1974, matriculating students do have access to their permanent files, which may include forms such as this one. We will not provide access to applicants, those who are rejected, or those students who decline an offer of admission.