

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

DEAN/ACADEMIC ADVISOR EVALUATION

FOR TRANSFER STUDENTS ONLY

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

TO THE APPLICANT

Give this form to the Dean of Students or your Academic Advisor after completing the top section. Please type or print in black ink.

Last name of applicant *First* *Middle (complete), Jr. etc.*

Permanent home address *City* *State* *Zip Code*

DEAN OR ACADEMIC ADVISOR

This student has applied for transfer admission to Hartwick College. A complete and candid report is an essential component of the candidate's admission file. Please return the completed form and any supporting documents to: Office of Admissions, Hartwick College, Oneonta, NY 13820.

Dean or Academic Advisor's Name *Position/Title*

College *Phone Number*

College Address *City* *State* *Zip Code*

Applicant's high school graduation date: _____

Is this student in good academic standing? yes no If no, please explain: _____

Is this student in good social standing? yes no If no, please explain: _____

In determining the following ratings, please compare this student with others with whom you have worked.

	BELOW AVERAGE	AVERAGE	ABOVE AVERAGE (TOP 25%)	EXCELLENT (TOP 10%)	AMONG THE VERY BEST (TOP 5%)
Academic motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic self-discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Signature *Date*

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.