



Warren Wilson COLLEGE

REGISTRAR REPORT FOR TRANSFERS

Instructions for Student Applicant: complete the Applicant Details section of form and send to the registrar at your most recent or current institution to be completed.

Instructions for Registrar: complete and sign the remainder of the form and email, mail, or fax to:

CPO 6375

Email: admit@warren-wilson.edu

Fax: 828.298.1440

PO Box 9000

Asheville, NC 28815-9000

APPLICANT DETAILS (To be completed out by the applicant before submitting to the Registrar)

Full Name:

Application submit date:

Applying for: Year:

Mailing Address:

Home Phone:

Cell Phone:

Email:

(Information below to be completed by the Registrar)

OFFICIAL PERSONNEL DETAILS

Full Name of official:

Title of official:

Email

Phone:

SCHOOL DETAILS

Name:

Address:

CEEB:

Website:

Signature of Official:

Date:

STUDENT ACADEMICS

Cumulative GPA:

Degree issued date (If applicable):

STUDENT EVALUATION

Applicant in good standing:

Eligible to return:

Attach explanation if no to either of the above

School discipline:

Criminal history:

Attach explanation if yes to either of the above

Recommendation: