



Dean of Students Form

Transfer Applicant: This form must be submitted to Hamline University before review of your application for admission.

I have applied for admission to Hamline University for the academic term beginning _____ and authorize the release of the following information.

Student's first name _____ Student's last name _____

Middle name _____ College ID _____

Address _____ Apt. _____

City, state, zip _____

Please check all that apply: I am over the age of 25. I have not taken any college courses in the last four years.
If you have checked both boxes, you do not need to complete the rest of the form.

Send this form to your most recent **Dean of Students** for completion.

Dean of Students: The student above has applied for admission to Hamline University. This form must be on file before the student will be considered for admission. Please complete the following questions.

Student's date of attendance _____

Is this applicant eligible to return to your institution? Yes No

Has the applicant been subject to disciplinary action for behavior on or off campus? Yes No

Was this student ever on disciplinary probation? Yes No

If yes, please describe _____

Do you know of other difficulties this student may have of which Hamline University should be aware of when considering this student for admission? _____

Additional information you think may be helpful _____

Signature of Dean _____ Date _____

Printed Name _____ Daytime telephone number _____

Name of institution _____

Institution address _____

Please return this form as soon as possible to:
Hamline University, Office of Undergraduate Admission, MS-C1930, 1536 Hewitt Ave., St. Paul, MN, 55104

Office of Undergraduate Admission
651-523-2207 • 1-800-753-9753 • fax 651-523-2458 • admission@hamline.edu • www.hamline.edu/admission