



Transfer Student Recommendation

Section I

(To be completed by student and forwarded to the Dean of Students at the current or most recent college or university attended.)

Name _____ Social Security # _____

Maiden or other name under which your records may be listed _____

Address _____ Telephone # _____

_____ E-mail _____

I understand that this recommendation is for admissions purposes only. As such, it is confidential and will not become a part of my permanent academic records at Bethel College.

_____ Date _____

Student Signature

Section II

(To be completed by the Dean of Students)

1. Has this student been subject to non-academic disciplinary action while attending your institution?

No _____ Yes _____ If yes, please explain: _____

2. Is this student eligible for continued enrollment at your institution? Yes _____ No _____

If no, please explain: _____

3. Would you recommend this student for admission to Bethel College? Yes _____ No _____

If no, please explain: _____

Other Comments: _____

Name _____ Title _____

Institution _____ Telephone # _____

Signature _____ Date _____

Return to: Bethel College
Office of Admissions
300 East 27th Street
North Newton, KS 67117
P. 316-283-2500 F. 316-284-5870

Bethel College is a four-year, Christian liberal arts college committed to the intellectual, personal and spiritual growth of students. Bethel seeks to assist students in cultivating clear paths to professional careers, advanced study and lives rich with possibility.