

**For Transfer Students,  
 Wings – Adult Education Degree  
 Completion Students, and  
 Second degree students.**

## College Official Recommendation

### To the Applicant:

Please complete the shaded box below and give this form to the **Dean of Students, Registrar, or the equivalent official at the college** where you are now or were most recently enrolled. Request that this form be mailed, faxed, or emailed to the Office of Admissions at Meredith College. Or, you may return the form to the Office of Admissions after your college official has completed and signed the recommendation.

I do  I do not waive my right to view this recommendation

Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_  
street, route or PO Box

city state ZIP/postal code province country

Term Applying for:  Fall  Spring  Summer \_\_\_\_\_ (year)

### To the College Official:

- Complete** any information requested on the **front and back** of this form.
- Return this form** directly to the Office of Admissions. This information will be held in confidence.

1. Is the student in good standing and eligible to return to your institution?

YES  NO If "NO," please state reason \_\_\_\_\_

2. a. Has the applicant ever been found responsible for a disciplinary violation at your school, whether related to academic misconduct or behavioral misconduct, that resulted in the applicant's probation, suspension, removal, dismissal, or expulsion from your institution?  YES  NO

b. To your knowledge, has the applicant ever been convicted of a misdemeanor, felony or other crime?  
 YES  NO

If you answered yes to either or both questions, please attach a separate sheet of paper or use your written recommendation to give the approximate date of each incident and explain the circumstances.

3. On what basis is this information given?

Records  Personal knowledge of student  Other (please specify) \_\_\_\_\_

**Meredith College admits qualified women students without regard to race, creed, sexual orientation, national or ethnic origin, age or disability.**

Detach here

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4. Do you recommend this student for admission to Meredith College?

- YES     NO     Do not know student  
 College policy prohibits giving recommendation     Prefer not to respond

Comments (attach additional page as needed): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_ Institution \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Note to the College Official: After signing, please print this document and return it to the applicant or by mail or email to Meredith College.



**Office of Admissions**  
3800 Hillsborough Street  
Raleigh, NC 27607-5298  
(919) 760-8581 or 1-800-MEREDITH  
FAX (919) 760-2348  
[meredith.edu](http://meredith.edu)

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