

# STUDENT TRANSFER FORM

Submit to:  
Office of Admissions  
PO Box 116  
Young Harris, GA 30582  
**or**  
pemcquade1@yhc.edu



## TO THE STUDENT:

Please complete this section of the form and then give to the Chief Judicial Officer at your current and/or previous institution(s), whether credit was earned or not. One form must be completed for each institution you have attended.

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

Address \_\_\_\_\_  
Number Street  
City State Zip

Name of College \_\_\_\_\_

I give permission for information regarding my academic and non-academic record to be released to Young Harris College.

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

## TO THE CHIEF JUDICIAL OFFICER:

The student named above has applied for admission to Young Harris College. In order for the Admissions Office to make an informed review of the applicant's record, we ask that you answer candidly and confidentially the questions below. Return the form to Young Harris College at the above address. If you have any questions, please call our office at 800-241-3754. Thank you for your cooperation.

To your knowledge, has the above mentioned student been disciplined by your institution or elsewhere for any violation of college policy, or federal, state or local law? \_\_\_\_\_ If so, please explain on an additional page and attach.

Is the above mentioned student eligible to return to your institution? \_\_\_\_\_ If no, please explain on an additional page and attach.

May we contact you for additional information about this student?  yes  no

Name \_\_\_\_\_

Title \_\_\_\_\_

Institution \_\_\_\_\_

Office Phone \_\_\_\_\_

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