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## Office of Admissions

1570 Baltimore Pike Lincoln University, PA 19352-0999

**800-790-0191** phone **484-365-8109** fax admissions@lincoln.edu

## TRANSFER STUDENT CERTIFICATION FORM

**Prospective Transfer Student:** This certification is to be completed by the Dean of Students or the administrative office in charge of disciplinary records for <u>each</u> post-secondary school you have attended as a student regardless of length of time that you were enrolled or length of time that has passed. Please inform the above office to return this form directly to the Admissions Office as applicants are not permitted to submit this form.

Name:	Date of Birth:	
Address:		
City:	State:	Zip:
Anticipated Entry Term: Fall	OR Spring	
1. Institution completing questionnair	e:	
2. Dates of Attendance:		
To the Dean of Students or the admir	nistrative officer in charge of	disciplinary records:
		y, PA and I authorize you to furnish any or sanctions imposed during the time of my
<u> </u>		Date:
COLLEGE/UNIVERSITY OFFI		••••••
NO disciplinary action or san	actions have ever been impo	sed against the above-named applicant.
YES disciplinary action or san (Please exp	actions have been imposed a lain with additional docume	
Name of College/University Officer:		
		(Print)
C.		Data

Please return completed form via mail, email or fax to: Lincoln University - Office of Undergraduate Admissions

Mail: 1570 Baltimore Pike

Lincoln University, PA 19352

Email: <u>admissions@lincoln.edu</u>

Fax: 484-365-8109

**STUDENT:** 

Phone: