

Office of the Dean of Students Evaluation Form

This form is required because you indicated on your BGSU graduate application for admission that you were dismissed, suspended or placed on probation for nonacademic reasons by a previous college or university. All required credentials must be received by our office at least six weeks prior to the start of the term you have requested for admission to allow for processing and review.

APPLICANT

Please complete this section and the forward to the Office of the Dean of Students or Student Conduct Office at the institution from which you were dismissed, suspended or placed on probation for non academic reasons.

Applicant's Name: _____
Last First Middle or Previous, if applicable

Permanent Address: _____
Number Street City State Zip

Intended start date: Fall Semester, 20____ Spring Semester, 20____ Summer Semester, 20____

The bottom section of this form must also be completed before a final determination on your application for admission will be made. Your signature and date below authorizes the release of the requested information.

Signature: _____ Date: _____

OFFICE OF THE DEAN OF STUDENTS OR STUDENT CONDUCT OFFICE

The above applicant has applied for admission to Bowling Green State University. Please complete the section below and return this form to the BGSU Office of Graduate Admissions with copies of all relevant records such as incident reports, sanction letters, hearing outcomes, etc. If you have additional comments, please add pages as necessary.

CONFIDENTIALITY

Materials submitted in support of an application for admission to Bowling Green State University are reviewed only by the Assistant Dean of Students and the staff are responsible for the admissions process.

Was this student involved in any non-academic conduct action during enrollment at your _____ Yes No
 institution? If yes, please describe the charge and action taken, including any sanctions: _____

Is this student eligible for immediate re-enrollment at your _____ Yes No
 institution? If no, please explain: _____

Are there any additional services this student may need? _____ Yes No
 If yes, please explain: _____

Institution _____ Signed _____
 Phone _____ E-mail _____
 Date _____ Position _____