



# Parkersburg West Virginia University®

## TRANSFER CLEARANCE FORM

**NON-ACADEMIC REPORT FORM FOR STUDENTS WISHING TO TRANSFER TO WEST VIRGINIA UNIVERSITY AT PARKERSBURG. COMPLETION OF THIS FORM IS NECESSARY IN ORDER TO COMPLETE THE ADMISSIONS PROCESS. THIS FORM MUST BE SUBMITTED AFTER ENROLLMENT IS COMPLETED AT YOUR PREVIOUS INSTITUTION.**

TRANSFER APPLICANT: PLEASE COMPLETE *SECTION A* AND FORWARD THIS FORM TO THE DEAN OF STUDENTS AT THE LAST COLLEGE OR UNIVERSITY WHICH YOU ATTENDED.

**SECTION A: TO BE COMPLETED BY THE STUDENT**

Name (Print) \_\_\_\_\_ SSN \_\_\_\_\_  
(Last) (First) (M.I.)

I authorize \_\_\_\_\_ which I attended from \_\_\_\_\_ to \_\_\_\_\_  
(College or University) (MM/YY) (MM/YY)  
to disclose to West Virginia University at Parkersburg all records relating to any misconduct I engaged in during said time period. See SECTION B below. When SECTION B has been completed, I request that this form be sent to the Executive Director of Enrollment at West Virginia University at Parkersburg.

\_\_\_\_\_  
(Student's signature) (Date)

**SECTION B: TO BE COMPLETED BY THE OFFICE OF DEAN OF STUDENTS**

PLEASE RETURN THE COMPLETED FORM TO: **STUDENT WELCOME CENTER  
WEST VIRGINIA UNIVERSITY at PARKERSBURG  
300 CAMPUS DRIVE  
PARKERSBURG, WV 26104**

1. According to your records, has the above student been suspended or expelled for non-academic reasons?  
No \_\_\_\_\_ Yes \_\_\_\_\_ Date of suspension or expulsion \_\_\_\_\_
2. If yes, what violation have they been found responsible for that prevented them from returning to your institution? \_\_\_\_\_
3. If yes, when is the student eligible to return to your institution? \_\_\_\_\_

School official completing this form:

Name \_\_\_\_\_ Signature \_\_\_\_\_

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

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_