

## SALVE REGINA UNIVERSITY TRANSFER REGISTRAR REPORT

Please complete the applicant information section and submit this form to the college official who has access to disciplinary records at each college/university you have attended. Your signature authorizes the release of information regarding your disciplinary record. Failure to submit this information will prevent your application from being reviewed. If you have been involved in disciplinary action at a previous institution, you may submit a separate statement explaining the incident. The completed form must be sent directly by the college official to: **Salve Regina University, Office of Undergraduate Admissions, 100 Ochre Point Avenue, Newport, RI 02840.** 

## PART I: TO BE COMPLETED BY APPLICANT

Name of Applicant Last   Home Address City		Last	First	Middle
		City	State	
Te	lephone		Email Address	
Ap	pplicant Signature to Auth	orize Release of Stu	dent Disciplinary Records	Date
PA	ART II: TO BE COM	PLETED BY CO	LLEGE OFFICIAL	
fol	lowing information on the	e above named stude	access to student disciplinary records. Please ent who is applying for transfer admission to Sa paper or the reverse side of this form for ad	alve Regina
1.	Is this applicant in good	l standing?	[ ] Yes [ ] No	
2.	Is this applicant eligible	e to return to your ins	stitution? []Yes []No	
	*If you answered "no" to either or both of the above questions, please explain			
3.	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 [ ] School policy prevents me from responding.			
4.	To your knowledge, has the applicant ever been convicted of a misdemeanor, felony, or other crime?			
	[ ] Yes [ ] No [ ] School policy prevents me from responding.			
	*If you answered "yes" to either or both of the above questions, please give the approximate date of each incident and explain the circumstances			
Sig	gnature:		Date:	
Name Printed:			Title / Position:	
Institution:			Telephone:	