



TO THE APPLICANT

This form should be completed by a college official(s) who has access to your academic and disciplinary records. Boston College requires that this form be completely filled out and submitted to our office from every college that the applicant attended on a full-time basis in order for your application to be reviewed for admission. Failure to submit the form, or submission of an incompletely filled out form will result in your application being withdrawn.

Please follow these steps to ensure the form is completed accurately and in its entirety.

1. Complete all relevant questions below, including the signature statement.
2. Give this form to a dean, advisor or other college official who has access to your academic and **disciplinary records**, and have them fill out both sections of the form.
3. If the official completing the academic portion does not have access to your disciplinary record, please have them forward it to a second official who can answer those questions before submitting it to Boston College.

Student Name (Last, Middle, First): _____

Date of Birth (mm/dd/yyyy): _____ / _____ / _____

Address: _____

College/University you now attend: _____

CEEB: _____

IMPORTANT PRIVACY NOTICE: By signing this form, I authorize every school that I have attended to release all requested records and recommendations to Boston College. I also authorize employees at Boston College to confidentially contact my current and former schools should they have questions about the information submitted on my behalf.

I waive my right to review all recommendations and supporting documents submitted by me on my behalf.

I DO NOT waive my right to review all recommendations and supporting documents submitted by me on my behalf. I have chosen not to waive my right to review my recommendation and supporting documents. I understand that my decision may lead my advisors or professors to decline to write recommendations on my behalf. I also understand that my decision may lead colleges to disregard any recommendations/ documents submitted on my behalf.

I understand that my waiver or no waiver selection cannot be changed after any recommendation or application submission.

Signature of Applicant: _____ Date _____

Academic Report

If you have access to the applicant's academic and disciplinary records, please fill out this form in its entirety. If you only have access to the applicant's academic record, please complete this section of the form, then forward to the appropriate official for completion of the disciplinary section, and ask that individual to submit the form to Boston College.

College Official's Name: _____

Signature: _____ Date: _____

Title: _____ College/University: _____

College/University Address: _____

College Official's Email: _____

College CEEB: _____ College Official's Phone Number: _____

1. Is this applicant in good academic standing? Check one: Yes No

2. Is this applicant eligible to return to your school? Yes No

If you answered no to either or both questions, please attach a separate statement to provide details.

Disciplinary Report

If you have access to the applicant's academic and disciplinary records, please fill out this form in its entirety. If you only have access to the applicant's academic record, please complete this section of the form, then forward to the appropriate official for completion of the disciplinary section, and ask that individual to submit the form to Boston College.

College Official's Name: _____

Signature: _____ Date: _____

Title: _____ College/University: _____

College/University Address: _____

College Official's Email: _____

College CEEB: _____ College Official's Phone Number: _____

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?

Check one: Yes No

If you answered yes, please attach a separate statement to give the approximate date of each incident and explain the circumstances.

Check here if you prefer to discuss this applicant over the phone with a transfer counselor.

Once form is filled out in its entirety, please scan and email to transfer@bc.edu or mail it to:

Boston College
Admission Office
Devlin Hall 208
140 Commonwealth Avenue
Chestnut Hill, MA 02467