Wake Forest University

To be completed by the student:

Office of Undergraduate Admissions • P.O. Box 7305 • Winston-Salem, North Carolina 27109-7305

SUPPLEMENT B: TRANSFER STUDENT COLLEGE REPORT

To the Student: Please fill in your name and address below and then give this form to the Dean of Students or another appropriate official of the institution(s) in which you are or were enrolled, whether or not you earned credit. Reproduce this form to send to each institution in which you have matriculated.

To the Dean of Students: The student named below, who has attended your college, has applied for admission to Wake Forest University. In order for our Admissions Committee to make an informed review of the applicant's record, we ask that you answer frankly and confidentially the questions below. We are grateful for your cooperation. Please forward the form to the address above. If you have any questions, feel free to call our office at 336.758.5201.

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ddress:		Number and Street	
	City	State	ZIP
Name of college:			
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pplicant's signature:			
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Please complete the above and sign one of	the statements in the box	below.	
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