Transfer Information Release Form

NAME:			
DATE:			
hard copy or email	a pdf of my College Report, lar programs to the following	Mid-Term Report and	s Office at Bates College to mail a /or Final Report from the Common of potentially transferring:
Deadline Date	School Name	School Conta	act Information (email preferred)
I'm applying to the Report and/or Fina	Registrar's Office at least fiv	e (5) business days be	mation for the school(s) to which fore the College Report, Mid-Tern wide the Registrar's Office with
		•	e Registrar's Office within five (5) Report may be mailed after the
SIGNATURE			SS YEAR & BATES ID NUMBER