

# Instructions for Requesting the Coalition Application Transfer Report Form

1. Please allow at least two weeks prior to the application deadline for this request to be completed.

Note: application deadlines vary.

2. Access the fillable PDF Coalition Application Transfer Report and Instructions handout at the El Camino College Transfer Center website located in the Private/Out-of-State Toolbox:

[www.elcamino.edu/academics/transfer-center/resources/toolbox-2.aspx](http://www.elcamino.edu/academics/transfer-center/resources/toolbox-2.aspx).

- A. Fill out the **APPLICANT** section of the Coalition Application Transfer Report and mark **YES to**

**WAIVE your right to review the Transfer Report evaluation.**

3. Complete the bottom portion of this handout.
4. Email a completed PDF copy of the Coalition Application Transfer Report and this handout to a counselor.  
**Please DO NOT print forms and provide counselor with hard copies.**
5. The counselor and the Student Support Services division will complete the information in the **UNIVERSITY OFFICIAL & SUMMARY** sections of the Coalition Application Transfer Report.
6. The Student Support Services division will email you the completed/signed Transfer Report which you will upload to the MyCoalition Tools **LOCKER** section of the Coalition application and then send to each college/university requesting the report.

## Student Information

Student Name: \_\_\_\_\_

El Camino Student ID #: \_\_\_\_\_

Student Email Address: \_\_\_\_\_

Student Contact Phone #: \_\_\_\_\_



# COALITION APPLICATION TRANSFER REPORT

## APPLICANT

Student Name \_\_\_\_\_ Date \_\_\_\_\_

Date of Birth (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

Coalition Applicant ID Number \_\_\_\_\_

Do you waive your rights under FERPA to review the evaluation below?

Yes       No

## UNIVERSITY OFFICIAL

*Please give this form to a University Official (typically a Registrar or Dean with access to both your academic and disciplinary records) to fill out the following two sections*

Institution Name \_\_\_\_\_ CEEB \_\_\_\_\_

Address \_\_\_\_\_

Name of Official \_\_\_\_\_

Title \_\_\_\_\_

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

## SUMMARY

Dates Attended (mm/yyyy) \_\_\_\_\_ to \_\_\_\_\_

Cumulative GPA \_\_\_\_\_ Scale \_\_\_\_\_

Projected Graduation Date (mm/yyyy) \_\_\_\_/\_\_\_\_

Is this student eligible to return to your institution?

Yes       No

Is this student in good academic and disciplinary standing?

Yes       No       School policy prevents me from responding

If no, please explain on an additional page, or  request a phone call

Has this student ever been subject to (found guilty of) disciplinary proceedings?

Yes       No       School policy prevents me from responding

To your knowledge, has this student ever been convicted of a misdemeanor or felony?

Yes       No       School policy prevents me from responding

If yes, please explain on an additional page, or  request a phone call

\_\_\_\_\_  
Sign

\_\_\_\_\_  
Date

*Please scan and attach this form to your application, or mail it directly to the admissions office of each college or university that requests one.*