

# Certification of Good Standing Form



**Instructions:**

Step 1: Complete and sign the personal information section.

Step 2: Provide form to official in charge of student conduct records.

It is your responsibility to ensure this form is completed and submitted to the Office of Admissions at Carthage College.

Your eligibility to enroll at Carthage College is not finalized until this completed form is received and reviewed.

## PERSONAL INFORMATION

To be completed by applicant.

Name: \_\_\_\_\_  
LAST FIRST MIDDLE MAIDEN SOCIAL SECURITY NUMBER

Address: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

I authorize the official in charge of student records at \_\_\_\_\_  
(COLLEGE CURRENTLY ATTENDING OR LAST COLLEGE ATTENDED IF NOT CURRENTLY IN ATTENDANCE)

to furnish the information required below to the Admissions Office at Carthage College for use in conjunction with my application for admissions.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## COLLEGE/UNIVERSITY OFFICIAL INFORMATION

To be completed by the official in charge of student records of the last college the Applicant attended or is currently attending.

Dates of attendance of applicant: \_\_\_\_\_

1. Is the student currently in good academic standing with your institution?  Yes  No

If "no," please explain: \_\_\_\_\_

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

If "no," please explain: \_\_\_\_\_

If "yes," please indicate any conditions: \_\_\_\_\_

3. Has the applicant been under investigation for an expellable offense, or been subject to probation, suspension, or expulsion as a result of a conduct process?  Yes  No

If "yes," please explain (if additional space is needed, please use back of this form): \_\_\_\_\_

\_\_\_\_\_

4. Please indicate the reason(s) why this student is leaving your institution.

\_\_\_\_\_

5. Would you like to speak with a Carthage College official?  Yes  No

6. Additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Date \_\_\_\_\_ College \_\_\_\_\_

Please return completed form to:

Carthage College, Office of Admissions, 2001 Alford Park Drive, Kenosha, WI 53144 or email to [admissions@carthage.edu](mailto:admissions@carthage.edu)