Oberlin College

International Transfer Midterm Evaluation

The College of Arts and Sciences

Office of Admissions
101 North Professor Street
Oberlin, Ohio 44074-1075
FAX: 440-775-6905
E-mail: international.admissions@oberlin.edu
Web site: www.oberlin.edu

To Be Completed by the Candidate

If you are currently involved in course work, please ask your instructors to give an evaluation of your progress to date. Return this form to Oberlin's Office of Admissions by the appropriate deadline.

Legal Name _____ Male _____ Female _____
FAMILY FIRST MIDDLE

Permanent Home Address _____
NUMBER AND STREET

_____
CITY STATE/PROVINCE COUNTRY ZIP/POSTAL CODE

To Be Completed by Candidate's Current Instructors

1. Course title_____ Comments

   Current grade _____as of _____

   Instructor's name _____

   Telephone (_____)_____
   Area code Number

   Signature _____

2. Course title_____ Comments

   Current grade _____as of _____

   Instructor's name _____

   Telephone (_____)_____
   Area code Number

   Signature _____

3. Course title_____ Comments

   Current grade _____as of _____

   Instructor's name _____

   Telephone (_____)_____
   Area code Number

   Signature _____

4. Course title_____ Comments

   Current grade _____as of _____

   Instructor's name _____

   Telephone (_____)_____
   Area code Number

   Signature _____

5. Course title_____ Comments

   Current grade _____as of _____

   Instructor's name _____

   Telephone (_____)_____
   Area code Number

   Signature _____