

Educational Opportunity Program **TRANSFER VERIFICATION FORM**

EDUCATIONAL OPPORTUNITY PROGRAM TRANSFER PROCESS

The student whose name appears on this form is applying for transfer admission to the State University of New York, Educational Opportunity Program. The ability to transfer within New York State Opportunity Programs (EOP, HEOP, SEEK/CD) is intended to enable students to make necessary institutional transitions that arise from changes in educational or personal needs while maintaining a continuum of services. Though this option is intended primarily for students who began their college studies in an Opportunity Program, there are specific circumstances in which a student who is not in such a program may be accepted as a transfer. As a reminder, all students must meet the New York State residency requirements.

INSTRUCTIONS

This form must be completed by the Opportunity Program director or a campus professional at the college from which the student is transferring. The person completing the form must be able to respond to questions regarding the student's academic and income eligibility, direct aid award distribution and overall participation in the program. Once completed, the form should be sent to the Educational Opportunity Program director at the campus the student is transferring to. In order for the campus to render a timely admission decision to the student, it is important that all sections of the transfer verification form are completed. Please return the form to the originating campus within seven business days of receipt.

If you have questions or require assistance, please contact the campus to which the student is applying.

1 New York Residency is defined by the following: (1) Have resided in New York State for twelve months prior to their day of registration in college, or (2) Reside in New York State at the time of application and lived in New York State for the last two terms of high school; or (3) Were residents of New York when they entered military service, Vista or the Peace Corps and re-established New York State residence within six months after completing their term of service.

2 Because the economic guidelines change annually, you will need to consult with the EOP administrator to confirm that the student met the economic criteria at the initial point of college entry. This does not apply to campuses with an EOP, HEOP, or College Discovery/SEEK Program.

Complete this section only if your campus has a New York State EOP, HEOP, or CD/SEEK Program.

PART 3. ACADEMIC BACKGROUND

Date of Admission to EOP: Fall Spring Summer

The student was enrolled in: EOP HEOP SEEK/CD

Are you aware of any institutions attended by the student prior to enrolling at your institution? If so, please specify:

PART 4. SEMESTERS OF ELIGIBILITY (TO BE COMPLETED ONLY BY SUNY CAMPUSES WITH EOP)

The Educational Opportunity Program policy guidelines restrict the number of semesters a student can receive EOP financial support. In completing this section, please identify the terms the student received EOP direct aid at your campus regardless of award level. Please do not list actual award amounts. Instead, simply indicate the year of financial disbursement. **(Please do not include any payments in connection with the pre-freshman summer program.)**

Term	Year	Term	Year	Term	Year	Term	Year
Summer		Fall		Winter		Spring	
Summer		Fall		Winter		Spring	
Summer		Fall		Winter		Spring	
Summer		Fall		Winter		Spring	
Summer		Fall		Winter		Spring	
Summer		Fall		Winter		Spring	
Summer		Fall		Winter		Spring	

2. According to our records, the student has also receive direct aid payments at the following SUNY Institutions:

Institution Name	Term

The student used a total of _____ terms of SUNY EOP direct aid funding.

