



**Letter of Interest  
Memorandum of Understanding for Transfer  
Between  
Howard Community College Honors Programs (Rouse/Schoenbrodt)  
To  
Dickinson College**

**Directions:** Please type or print. Complete and submit to to the Office of Admissions and Advising at Howard Community College.

**STUDENT INFORMATION**

1. **Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Middle Initial:** \_\_\_\_\_
2. **Social Security Number:** \* \_\_\_\_ - \_\_\_\_ - \_\_\_\_ and **Student ID (if applicable):** \_\_\_\_\_  
\*Your SSN is requested for tracking purposes between institutions.
3. **Current Address:**  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
4. **Home Phone:** \_\_\_\_\_ **Business:** \_\_\_\_\_ **Cell/Mobile:** \_\_\_\_\_
5. **E-mail:** \_\_\_\_\_
6. **Birthdates (MM/DD/YYYY – i.e. 01/24/1980):** \_\_\_\_/\_\_\_\_/\_\_\_\_
7. **Gender:** \_\_\_ M \_\_\_ F

**ACADEMIC INFORMATION**

1. **Please indicate which honors program you arer a member:**  
\_\_\_ James W. Rouse Scholars Program      \_\_\_ Frederick K. Schoenbrodt Honors Program
2. **Current learning program/program of studies:**  
Program Name: \_\_\_\_\_ Program Number /Curriculum Code: \_\_\_\_\_
3. **Please indicate the academic major or majors you are considering upon transfer:**  
\_\_\_\_\_  
\_\_\_\_\_

## Signature Statement

### I understand that:

- I must submit my Letter of Interest to pursue a Bachelor's degree program at Dickinson College as soon as possible to insure a seamless transition as well as determine my eligibility for academic scholarships and other financial aid resources.
- In addition to course completion, many academic majors may have specific requirements and prerequisites. I must meet with an advisor from Howard Community College to review my progress and receive information about these requirements. I must also meet with an admissions advisor from Dickinson College as recommended or required.
- I must inform Howard Community College of any changes in my plans and update relevant personal information.
- This form is not an application for, nor a guarantee of, admission to Dickinson College. It is simply a notification of my interest to pursue one of the Bachelor's options above. I will need to complete additional application requirements as part of my transfer.

I authorize Howard Community College to exchange necessary information regarding my matriculation and course work, including academic transcripts, to Dickinson College for the program indicated above. This will facilitate the transfer process and track academic progress.

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

### Office Use Only

#### Received

Initials: \_\_\_\_\_

Date: \_\_\_\_\_

Comments: \_\_\_\_\_

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#### Entered

Cohort Group: \_\_\_\_\_

ImageNow: \_\_\_\_\_

Comments: \_\_\_\_\_

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