

TRANSFER RELEASE FORM

Please read and complete this form if you wish to transfer to the Indiana University Jacobs School of Music from another school. Without this signed document, the Jacobs School of Music cannot offer financial aid.

The National Association of Schools of Music Code of Ethics states:

“A transferring student who has not completed a degree program can be considered eligible for financial aid during the first term of enrollment in the new institution only if the music executive of the school from which the student is transferring specifically approves. . . . Approval is to be sought prior to the offering of the financial award by the institution to which the student may transfer.”

This guideline was written to avoid the possibility of one school “recruiting” students from another with offers of financial assistance. This document will not change your status at your current school and does not necessarily indicate that you will be withdrawing. It merely authorizes the Jacobs School of Music to consider you for scholarships and financial aid.

In order to comply with this practice, please fill out the top part of the form below, bring it to the appropriate administrative office (e.g. admissions department, associate dean's office) of your current school and ask a representative to complete the bottom for you. Send the completed form to: Office of Admissions and Financial Aid, Indiana University Jacobs School of Music, Merrill Hall 101, 1201 East Third Street, Bloomington, Indiana 47405-7006.

I am applying for admission to the Indiana University Jacobs School of Music and wish to be considered for financial assistance there.

Name: _____

Major/Degree: _____

Signature: _____

Date: _____

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This acknowledges that the student named above is seeking admission to the IU Jacobs School of Music and is requesting financial assistance. In accordance with the NASM Code of Ethics, approval is granted for the IU Jacobs School of Music to consider this student for financial assistance.

Name: _____

Title: _____

Signature: _____

Date: _____

Institution: _____