



**GRAND VALLEY
STATE UNIVERSITY**
DEPARTMENT OF MUSIC,
THEATRE, AND DANCE

**Prospective Transfer Student Release Form
for Possible Scholarship Consideration**

Grand Valley State University Department of Music, Theatre, and Dance honors the Code of Ethics established by the National Association of Schools of Music which 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.

In accordance with the above statement, please complete the form below and mail to:
Cassandra DeHaan
Department of Music, Theatre, and Dance, Grand Valley State University
1300 Haas Center for Performing Arts, 1 Campus Drive, Allendale MI 49401.

Both sections must be completed before any financial award considerations, if available, can be made.

PART I (to be completed by the student)

I am applying for admission to the Department of Music and Dance at Grand Valley State University and wish to be considered for a financial award, if available, from GVSU.

Name: _____ Signature: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____ Email: _____

Degree Program: _____ Concentration: _____

PART II *(to be completed by the Music administrator of the student's current school)*

In accordance with the NASM Code of Ethics, I confirm that I am aware that this student is pursuing admission into the Department of Music, Theatre, and Dance at Grand Valley State University and that this student is requesting consideration for a financial award, if available. This student is released to accept any such award, if offered.

At this time, this student: *(please circle one)*

IS or IS NOT in good standing

IS or IS NOT receiving a financial award from this institution.

Signature: _____ Date: _____

Name: _____ Title: _____

Institution: _____