

## Inter American University of Puerto Rico Ponce Campus Admissions Office

INTER Ponce INTER Ponce

Part A: Applicant's authorization:								
1.								
Father's surname		Mother's surname			First name			
2. Social Security		3. Telephone nu		umber				
Send to: Inter American Universi Ponce Campus - Admis 104 Turpeaux Industria Mercedita, PR 00715-1	I hereby authorize the Dean of Students Affairs Office or designated to send the request information to the Admissions Office of Inter America University of Puerto Rico, Ponce Campus.  Please print the name of Institution:							
Student Signature			Date					
Part B: Dean of Student Office:								
1. ¿Was the student involved in any disciplinary action at Institution?				YES		NO		
2. ¿Do you recommended this applicant to be admitted at American University of Puerto Rico?				YES		NO		-
3. ¿Is the student eligible to be readmitted at your Institution?				YES		NO		
4. ¿Does the student offer any reason to transfer from your Institution?				YES		NO		
Comments:								
Signature (Dean of Students)			 Date					
	Please, sign in b	lue ink and plac	ce the official	stamp				

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