

Appendix A  
**Reverse Transfer**  
**Bloomsburg University of Pennsylvania and Bucks County Community College**  
**Application Request**

I formally request that Bloomsburg University of Pennsylvania (BU) share my educational information and forward to Bucks County Community College (Bucks) an official Bloomsburg University of Pennsylvania transcript.

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

BU ID: \_\_\_\_\_ Bucks ID (if known): \_\_\_\_\_

Total Number of Bucks Credits: \_\_\_\_\_ Bucks Major: \_\_\_\_\_

Bucks GPA: \_\_\_\_\_ BU GPA: \_\_\_\_\_ BU Major: \_\_\_\_\_

**FERPA Release:** Under the Family Educational Rights and Privacy Act (“FERPA”) of 1974, and as amended, I understand that my educational records cannot be released without my written permission. I therefore authorize the release of my education records from BU, in order to share student data information between the two institutions without violation of FERPA. I understand that this FERPA Release will be in effect as long as I am participating in the Reverse Transfer Program between BU and Bucks and I have the right to rescind this FERPA Release at any time by providing the BU Registrar with written notice of my rescission. I understand the FERPA Release and agree to the disclosure of my education records between BU and Bucks for the purpose of credit evaluation to determine the awarding of an associate’s degree from Bucks.

My signature below is agreement that:

I understand the FERPA statement and the authorization, and agree to my student records being shared between Bloomsburg University and Bucks County Community College for the purpose of credit evaluation to determine the awarding of an associate degree and evaluation of the Reverse Transfer program.

- If applicable, an appropriate associate degree will be awarded based on my records, requirements of the degree, and credits toward degree.
- I understand I must sign the Bucks *Request for Reverse Transfer Graduation* form, and the academic program and catalog year at Bucks must both be eligible for graduation (not in obsolete status). If I wish to request an associate degree in a major other than my active major, I must complete the Bucks *Change of Major* form.
- If it is appropriate to award an associate degree, my signature below gives permission to Bucks County Community College to award the degree and notify me of the results.

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