



# Crimson Achievement Program Participation Form

Last Name

First Name

Middle Initial

Birth Date

Email Address

I authorize IUP to defer my application to the upcoming

Spring semester (begins in January)

Fall semester (begins in August)

I plan to earn 12 college level, non-developmental credits at an accredited community college or other four-year college or university. My top choices for where I will enroll are:

School 1

School 2

School 3

I understand that:

- This form indicates my interest in participating in the Crimson Achievement Program, but that I must meet the minimum transfer student requirements in order to be admitted to IUP.
- This is not a binding agreement, but rather a way to indicate my interest in entering IUP as a transfer student and learning information to make my transition as smooth as possible. I may choose to cancel my application to IUP at any point.

Student Initials: