Thank you for your interest in Binghamton University’s Educational Opportunity Program (EOP).

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If your current college or university offers an opportunity program (i.e., College Discovery, EOP, HEOP or SEEK), you must have been admitted through that program in order to be eligible as an EOP transfer student at Binghamton University. If your current college or university does not offer an opportunity program, you may still be eligible. This form and further financial documentation are required.

The Transfer Verification Form is required for ALL transfer students applying to EOP. It is completed and submitted by the college you are currently or have previously attended. If you have attended multiple colleges please provide this form to the most recent school. Have the completed form mailed directly back to Binghamton University at the address on the bottom of the form.

We suggest hand delivering or mailing this form directly to the office of the opportunity program you were a part of. Please be advised that no decision on your application can be made until we receive this information.
The student named above is currently a candidate for admissions to the Educational Opportunity Program at Binghamton University. In order to transfer to our program, candidates must demonstrate participation in a similar program. Please provide the following information and return to Binghamton University as soon as possible. Please be advised that no decision on this candidate’s application can be made until we receive this information.

College Name ___________________________________________ College CEEB Code ______________

1. _______ The student named above was admitted through regular admissions. Our college _______ does or _______ does not participate in an opportunity program (i.e. EOP, HEOP, SEEK)
   OR
   _______ The student named above was admitted through one of the following programs:
   _______ College Discovery _______ EOP _______ HEOP _______ SEEK
   _______ Other (please explain)______________________________________________________

2. Please list semesters of attendance________________________________________________

3. Please indicate number of semesters of eligibility used at institutions prior to yours__________________________

4. Is there any reason this student cannot return to this institution: _________________________________________
   _____________________________________________________________________________________________

Program Director _________________________________________________________________________________
Signature _______________________________________________________________________________________
Date __________________________________________________________________________________________

The above named student met the financial guidelines for the Educational Opportunity Program at the time of entrance to the program. Documentation of eligibility is on file at this campus. _________________________________________

Financial Aid Officer ____________________________________________________________
Title ____________________________________________________________
Signature ____________________________________________________________
Date __________________________________________________________________________________________

Return to:
Binghamton University
ATTN: Educational Opportunity Program
PO Box 6000
Binghamton, NY 13902-6000

Fax: 607-777-4445
E-mail: eopadmit@binghamton.edu