

Prospective Student Referral Form

Randolph College seeks to strengthen its pool of prospective students through R-MWC alumnae, Randolph College alumni, faculty, staff, parents, and friends of the College. If you know a student whom you feel is a good fit for Randolph, please take a moment to complete this form and return it to the Office of Admissions.

Please provide as much information as you are able.

STUDENT INFORMATION

First Name	Middle Name		Last Name
Home / Cell Phone	Email		
Street Address, City, State		Zip	Country
Name and city of high school			Graduation Year
Academic Interest and Extracurricular A	ctivities:		
YOUR INFORMATION			
Name			
Email			
City/State			
Relationship to Randolph: □ Current St	tudent □ Parent □ Friend □ Staff/Fa	culty 🗆 Alumna/Alumnu:	s, class year:
 Relationship to student			