

campus

Transfer students aided by A&M

By CINDY COLVIN
Battalion Reporter
Texas A&M University has experienced about a 20 percent increase in enrollment of transfer students since 1974, according to figures released by Dr. Billy Lay, director of admissions.

This fall, 2,402 transfer students, those students who have been classified as bringing college credit from another university or junior college, registered at Texas A&M.

It is not the only university to attract transfer students. Dr. Robert Wakeup, professor of educational administration at Texas A&M, said the University of Houston was the leading institution in attracting

transfer students. This may be because there are many community and junior colleges within the Greater Houston area, said Lay.

The University of Houston was followed distantly by the University of Texas and Texas A&M University, respectively.

The main reason transfer students, particularly junior and community college students attended these schools are for primarily financial reasons. According to a study by the American Association of Community and Junior Colleges, 70 percent of all junior college students work full-time. Most of these students were involved in occupations related to their fields of study.

Most junior or community colleges tend to be reasonably priced because of lower operation costs. The campuses are much smaller than a university. Fees at junior colleges are generally much lower at junior colleges than at universities.

To help students who transfer from a junior or community college, the university offers 10 scholarships per year, ranging from \$300 to \$500. To be eligible for this scholarship, the applicant must be a graduate of a junior or community college. The applicant must maintain a 3.0 GPA.

Transition to four-year university life is another problem for transfers at Texas A&M. Glenna Witt, student

development coordinator for the university, said that generally, transfers are apathetic toward being helped.

"Some come to register thinking that because they've been through two years of college they don't need our help. It's a few weeks later that they realize they really needed our help," Witt said.

In addition to apathy, transfer students have a problem with adjusting to the higher academic level of Texas A&M. Betty Mayfield, counseling psychologist at the Academic Counseling Center, said that junior colleges don't provide enough background material in a student's area of study. Often students are required to know much more about a particular subject area at a university, compared to a course taken at a junior or community college.

When they enter higher level courses, they find themselves behind the rest of the class, said Dr. Wade Birch, director of the Personal Counseling Center.

Another service Texas A&M provides transfer students, available through the Academic Counseling Center, is an indirect aid. Each year, the Association of Former Students and the Academic Counseling Center invite counselors from junior colleges to attend a conference here, Hayfield said. This allows the junior college counselors to learn of the problems facing transfer students, Mayfield said.

Witt, who also organizes new student conferences, said that this summer, the University officials hope to have three fish camps this summer, and that one may be exclusively for transfer students.

From M.D. to Ph.D.

Prof's career changed

By SHERRY WOODARD
Battalion Reporter
Dr. Eric Deudon, a French literature professor at Texas A&M University, paces in front of his class enthusiastically explaining the French television system.

Eight years ago, he came to this country with hopes of being another kind of doctor.

"I was a medical student in France studying to be a general practitioner," Deudon said. "I wanted to practice in a Peace Corps type of program in a Pacific island like Tahiti."

Then, like a segment from a love story, Deudon met and fell in love with an American tourist. They became engaged and later married.

She was from Richmond, Va., and there was no way her parents would allow her to live in Paris," he said. "So I decided to make the move to the United States, continue my studies and become a physician here," Deudon said.

"I arrived in New York with \$80 in my pocket and a suitcase," said the 30-year-old young man, clad in corduroy pants and a tie and gesturing with an unlit cigarette. "I was only vaguely aware of how the American medical schools operated before coming here. I was just in love."

The first problem Deudon had was with language.

"The first year was bad," he said.

"The language barrier was enormous."

Deudon said he was rejected by two medical schools in Virginia before deciding his chances of being accepted on the basis of his existing credentials were slim.

"I would have had to start all over again," he said, "and my chances of being accepted out of 3,000 hopefuls were too small for that."

Deudon added, "In medical schools they may accept a black or a Mexican to fill a minority slot, but chances are, they won't accept a Frenchman."

Deudon said he then went to Virginia Commonwealth University and earned a doctorate in French literature and linguistics.

Deudon said he doesn't favor the American system of medicine more than the French system and vice versa.

"In France, a physician has the option of going into a private practice or signing a contract to practice medicine in the government medical social security program," Deudon said. "Most physicians sign the contract because of tax benefits."

With this system, Deudon said, even the poor can have top quality treatment by a specialist.

Doctors in the social security program charge low fees, which patients pay only 10 percent. The gov-

ernment pays the rest.

"A poor person in France could afford to see the equivalent of Christian Barnard for \$5," he said.

"I remember when I was young and my sister went in for an appendectomy," Deudon recalled. "She stayed six days in the hospital. There was lab work, X-rays and surgery. After the government paid its share of the bill, she had to pay only \$13 out of her own pocket."

But Deudon said technically the United States has the best medical care.

"If I'm going to be involved in a car accident at 2 in the morning and require emergency treatment, I'd rather be taken to an American hospital than a French one," Deudon said in his accented rapid voice.

Aside from the medical system, Deudon said a cultural difference he discovered between Americans and the French was the discipline of the American people.

"The French are anarchist," he said. "They're constantly trying to beat the system."

Deudon said he refers to himself as an American, not as a French-American.

"I've made my choice," he said. "It's here I want to be a citizen of. It's here I want to be buried."

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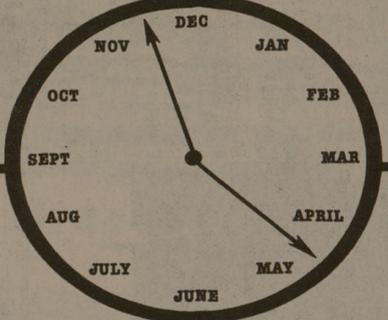
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BALANCE AT END OF:	\$25	\$50	\$100	\$125
1st Year	\$ 311.29	\$ 622.58	\$ 1,245.16	\$ 1,556.43
2nd Year	648.50	1,297.00	2,594.00	3,242.50
3rd Year	1,013.80	2,027.60	4,055.20	5,068.99
4th Year	1,409.52	2,819.04	5,638.08	7,047.80
5th Year	1,838.20	3,676.40	7,352.80	9,191.01
6th Year	2,302.99	4,605.18	9,210.36	11,512.93
7th Year	2,805.85	5,611.30	11,223.60	14,028.24
8th Year	3,350.81	6,701.22	13,402.44	16,753.05
9th Year	3,940.96	7,881.92	15,765.84	19,704.79
10th Year	4,580.48	9,160.96	18,321.92	22,902.38
15th Year	8,671.47	17,342.94	34,685.88	43,357.35
20th Year	14,774.51	29,549.02	59,098.04	73,872.57
25th Year	23,879.19	47,758.38	95,516.74	119,395.93
30th Year	37,461.76	74,923.52	149,847.04	187,308.80
35th Year	57,724.58	116,449.16	230,895.33	288,622.91
40th Year	87,953.16	175,908.32	351,812.63	439,765.79

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