

Request for Transfer
Master of Science Specialty Option

This form is to be completed when a student wishes to transfer from one Master of Science program option in the College of Nursing to another program option in the College of Nursing. Admission to the requested option is not guaranteed.

PLEASE PRINT OR TYPE:

Date _____

Student Name _____

Student ID _____

Term of admission to the MS program _____

Program option _____

Request transfer to _____ (program option)

for (term) _____

1. Please state your rationale for this change. (Attach sheet if necessary)

2. Academic status:

Yes No

a) Is your admission status currently "provisional"?

[] []

b) Are you currently on academic probation?

[] []

c) Have you earned a grade of B- or less in any course in your current program option?

[] []

d) Do you currently have any grade(s) of IW or IF? If so, please list.

[] []

Student Signature _____

Date _____

Student Instructions:

Request for Transfer of Option form must first be signed off by your current Program Option Coordinator and your new/requested Program Option Coordinator. Then return form to Office of Student Affairs and Diversity for Director signature.

Approved Denied

[] []

Current Assigned Advisor Signature _____

Date _____

[] []

Current MS Program Option Coordinator Signature _____

Date _____

[] []

New MS Program Option Coordinator Signature _____

Date _____

[] []

New MS Program Director Signature _____

Date _____

[] []

Director of the Office of Student Affairs and Diversity Signature _____

Date _____

After all above signatures have been completed, route to Mary Diaz.

For the Office of Student Affairs and Diversity office use only-

- Student file
SIS
Copy to Graduate School
Copy to MS Program Office

For MS Program office only-

- Student file
Copy to Program Director
Copy to Area Coordinator
Copy to New Program Option Coordinator
Copy to Advisors - Old and New