

RUTGERS

School of Graduate Studies

Office of the Dean · The School of Graduate Studies
25 Bishop Place · New Brunswick · New Jersey 08901-1181
p. 848/932-7034 · f. 732/932-7407

TRANSFER FROM ONE GRADUATE PROGRAM TO ANOTHER

(AFTER COMPLETING A DEGREE)

- Currently registered students who *DO* intend to complete degree in current program.
- Complete and submit this form to the School of Graduate Studies, 25 Bishop Place, CAC.
- Application, file, and transcript will be forwarded to **prospective** Program Director for signature.
- Upon approval, return to the School of Graduate Studies for evaluation.

STEP 1: TO BE COMPLETED BY THE STUDENT:

Name _____ RUID# _____

Street _____

City _____ State _____ Zip _____

Telephone _____ Email _____

Citizenship: U.S. _____ U.S. Perm. Res. _____ Foreign _____

Date of enrollment in the School of Graduate Studies _____

Current Program _____

Date of completion _____ Degree Status _____

Desired Program and degree status _____

Term effective: Fall _____ Spring _____ Summer _____ Year _____

Please explain why you are requesting admission to this program:

STEP 2: TO BE COMPLETED BY PROSPECTIVE DIRECTOR:

This application and file are being forwarded to you for consideration of a prospective applicant. Please review these materials and return *only* the application to the Graduate Dean's Office, 25 Bishop Place, CAC. Copies of this application will be sent to both sending and receiving programs upon final action.

The candidate IS _____ IS NOT _____ acceptable to the graduate program in _____ as a prospective candidate for the _____ degree. The reason for *acceptance* or *non-acceptance* is as follows:

Prospective Director

Date

STEP 3: TO BE COMPLETED BY THE CENTER FOR GLOBAL SERVICES:

International Students must provide financial documentation to submit for review to the Center for Global Services, 180 College Avenue, CAC. The endorsement must be obtained *after* submitting to program director.

Signature (International Student Advisor)

Date

STEP 4: TO BE COMPLETED BY THE SCHOOL OF GRADUATE STUDIES:

Conditions for this transfer: _____

School 16 Class _____ Curriculum _____

Approved _____ Not Approved _____ Effective: Fall _____ Spring _____ Summer _____ Year _____

Dean's Signature

Date