

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

(BEFORE COMPLETING A DEGREE)

This form is for currently registered students who *DO NOT* intend to complete a degree in their current graduate program. Please follow the instructions bulleted below:

- Complete and submit this form to Graduate Director for signature.
- Application, file, and transcript will be forwarded to **prospective** Graduate 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 School of Graduate Studies _____

Current Program and degree status _____

Desired Program and degree status _____

Term effective: Fall _____ Spring _____ Summer _____ Year _____

Please explain why you are applying for this program change:

STEP 2: TO BE COMPLETED BY CURRENT GRADUATE DIRECTOR:

I have reviewed this request for transfer. I *recommend* _____ *do not recommend* _____ the transfer for the reasons indicated below.

Current Director

Date

STEP 3: TO BE COMPLETED BY PROSPECTIVE GRADUATE DIRECTOR:

The candidate *is* _____ *is not* _____ acceptable to the graduate program in _____ as a prospective candidate for the _____ degree. The reasons for *acceptance* or *non-acceptance* are indicated below.

Prospective Director

Date

STEP 4: TO BE COMPLETED BY THE CENTER FOR GLOBAL SERVICES:

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

Signature (International Student Advisor)

Date

STEP 5: 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