INTER-COLLEGE TRANSFER APPLICATION

APPLICATION & ELIGIBILITY

All students who wish to change their college affiliation must complete an application for inter-college transfer. Students currently withdrawn from the University must submit a $60 non-refundable application fee with this application. Only those students admitted to a degree granting college may utilize the inter-college transfer process. Non-degree students cannot use this application, instead, must apply through the Undergraduate Admissions Office.

INSTRUCTIONS AND DEADLINES

1. Complete this form (and attach a $60 check made payable to UMass Boston if currently withdrawn).
2. Request an advising transcript (no charge) from the One Stop Center or through WISER.
3. Request transcripts from all schools you have attended.
4. Submit form and transcripts to the appropriate office:

<table>
<thead>
<tr>
<th>College</th>
<th>Office Address</th>
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</thead>
<tbody>
<tr>
<td>College of Liberal Arts</td>
<td>Office of Undergraduate Studies, Campus Center 1st Floor, Room 1300.</td>
</tr>
<tr>
<td>College of Science and Mathematics</td>
<td>Deadline for submission of the form is the end of the add-drop period for each semester, as noted on Registrar’s website.</td>
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<tr>
<td>College Public and Community Service</td>
<td></td>
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<tr>
<td>College of Education and Human Development</td>
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<tr>
<td>College of Management</td>
<td>CM Undergraduate Program Office, McCormack Hall, 5th Floor, Room 603.</td>
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<td></td>
<td>Inter-college transfer applications are evaluated between Jan. 1\textsuperscript{st} and March 1\textsuperscript{st} for the Fall Semester, and between June 1\textsuperscript{st} and Oct. 1\textsuperscript{st} for the Spring Semester. Students must specify either management or information technology major and must declare a specific concentration once admitted to the College of Management.</td>
</tr>
<tr>
<td>College of Nursing and Health Sciences</td>
<td>Dept. of Nursing, Science Building, 2nd Floor, Room 02-15G.</td>
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<tr>
<td></td>
<td>The traditional Nursing program accepts applications for both the Fall and Spring Semesters. The deadline to apply is Nov. 1\textsuperscript{st} for the Spring Semester and Feb. 1\textsuperscript{st} for the Fall Semester.</td>
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<tr>
<td></td>
<td>The RN-Online Program deadlines are: April 1\textsuperscript{st} for the Summer, July 1\textsuperscript{st} for the Fall, and Nov. 1\textsuperscript{st} for the Spring.</td>
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<tr>
<td></td>
<td>The Accelerated Nursing program accepts applications for a summer start date only. The deadline to apply is Feb. 1\textsuperscript{st}.</td>
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<tr>
<td>Dept. of Exercise and Health Sciences</td>
<td>EHS Program Coordinator, CNHS, Science Building, 2nd Floor, Room 2-15G.</td>
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<td></td>
<td>EHS accepts inter-college transfer applications for both the Fall and the Spring semesters. The deadline for the Spring Semester is Nov. 1\textsuperscript{st}, and the deadline for the Fall Semester is July 1\textsuperscript{st}.</td>
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ADMISSION

Approval of transfer is not guaranteed. Each student will be evaluated individually to determine acceptability into the college. Admission into all colleges is based upon both the availability of space and the student’s demonstrated ability to succeed.

TRANSFER CREDIT

Upon acceptance to a new college, all prior earned credits (UMass Boston as well as other institutions) will be re-evaluated for applicability to the new college. Be advised that a change in college can result in the loss of earned credit towards graduation.

NOTIFICATION

All applicants will be notified by mail of their decision (2-4 weeks after deadline).
IMPORTANT: Complete each item. Incomplete forms will not be processed. Please PRINT.

Name: __________________________________________________________________________
  last   first   middle

Address: ________________________________________________________________________________

UMS #: __________________________ Email Address: __________________________

Telephone (Home): __________________________ Telephone (Work): __________________________

Are you currently enrolled at UMass Boston?  □ Yes  □ No

Current College and Major: __________________________________________________________________________

College to which you are applying: __________________________________________________________________________

Intended Major (Cannot be “Undecided”): __________________________________________________________________________

List all Colleges Attended: __________________________________________________________________________

PERSONAL STATEMENT

If you are applying to CLA, CSM, CPCS, CNHS, or CEHD please provide a short written statement clearly expressing your reasons for requesting an intercollegiate transfer.

________________________________________________________________________

FOR OFFICE USE:

Name of College: __________________________________________________________________________

New Major: __________________________________________________________________________

Acceptance Effective:  □ Spring  □ Fall  20____ Date: __________________________

Name of College Official (Print): __________________________________________________________________________ Title: __________________________________________________________________________

Signature of College Official: __________________________________________________________________________

Registrar’s Signature: __________________________________________________________________________