Application for Internal Program Transfer

Complete this form to apply for transfer from one Sierra Nevada College program (e.g., traditional ground) to another (e.g., online degree program). The decision for internal program transfer must be made between the student, the student’s academic advisor, and the department chair of the program to which the student is transferring. Return completed application to the Provost for Undergraduate Education for final review.

General Information

Date: _____________________________   ID No: ________________________________

Name: _____________________________________________   ______________________

Last                                          First                                          Middle

Current Program: ___________________________   Desired Program: ______________________________

Semester last attended current program: ____________________________

Provide a detailed statement indicating the reason for your program transfer request:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________


Provisions (completed by current Department Chair and discussed with student; if provision necessary, initial blank(s) accordingly)

I understand my continued enrollment in the requested program is contingent upon these stipulations:

_____   Successful completion of first orientation course (e.g., ELEC 105, CORE 101, etc.)

_____   C or better in first required major course (lower or upper division acceptable)

_____   Other: __________________________________________________________

As the transfer applicant, I agree to provide the Department Chair evidence these provisions were met at the conclusion of my first semester. If provisions are not met, I understand re-application may be required.

Required Signatures for Application Review

Student (printed name) ___________________________   signature

Academic Advisor (printed name) ___________________________   signature

Department Chair (printed name) ___________________________   signature

Dean of Online Education (printed name) ___________________________   signature

_____ Approved _____ Disapproved

_____ Recommended _____ Not Recommended

Updated: 11/8/13
Internal use only

Approval
Submited completed application to Provost (undergraduate) for review

__________________________________________________  _____ Approved _____ Disapproved

Provost

If approved, Executive Assistant to the Provost will forward a copy of the approved form to the Registrar who will notify the student, academic advisor previous to program transfer, appropriate online program chair, financial aid, and Business Office of transfer approval.

If disapproved, state reason below and forward a copy of the completed form indicating the reason for disapproval to the requesting student and their Academic Advisor.