

Request To Transfer From One Major/Degree/Certificate To Another

Registered as a graduate student within the last 24 months (**active**) transferring to a different graduate degree or program. Section I, II, and III **MUST** be completed before submitting the form to the Graduate College.

Graduated from Iowa State University with a graduate degree and coming back in a different graduate degree or program. Section I and III must be completed before submitting the form to the Graduate College. Section II is **NOT** required.

Graduate students who have not been enrolled in the last 24 months should complete the Request for Reinstatement form.

Students who have never been in a degree-seeking program as a graduate student do not use this form. These non-degree students must be formally readmitted to the Graduate College and should contact the Admissions Office, 100 Enrollment Services. [Students who are in interdepartmental majors complete the Home Department form to change departments.](#)

I. STUDENT INFORMATION:

Student Name:

(Last)

(First)

(ISU ID#)

Proposed Major/Certificate:

Proposed Department:

Proposed Degree Sought:

Effective Term:

Year:

Do you plan to complete a degree in your current program before transferring?

Yes

No

If yes, expected degree:

Completion date:

Will you be taking classes on campus or via distance education?

Campus

Distance

Student's Signature:

Date:

II. CURRENT PROGRAM/CERTIFICATE INFORMATION (Complete ONLY if you are a current/active graduate student):

This student has made Good Fair Poor

progress toward a degree/certificate:

in the Major:

and Department:

Include typed or printed names and signatures

Comments:

Current DOGE:

Date:

Current Dept. (optional):

Date:

III. PROPOSED PROGRAM/CERTIFICATE INFORMATION:

Transfer Denied. I do not agree to accept this student in the Major/Certificate:

Transfer Approved. I do agree to accept this student in the Major/Certificate:

Include typed or printed names and signatures

in the Department of:

Receiving DOGE:

Date:

Receiving Dept. (optional):

Date:

IV. GRADUATE COLLEGE RESPONSE:

Graduate College Signature:

Date:

Copy:

Program 1

Program 2

Records

Sched & Fees

