

# UNDERGRADUATE INTER-COLLEGE TRANSFER APPLICATION

University of Massachusetts Boston  
100 Morrissey Boulevard  
Boston, MA 02125-3393

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Student's Name

Soc. Sec. Number

UMS ID Number

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## APPLICATION & ELIGIBILITY

All students who wish to change their college affiliation must complete an application for inter-college transfer. If you are currently withdrawn from the University you must complete the Readmission Application and submit that form and a \$25 non-refundable application fee with this application. Only those students admitted to a degree granting college may utilize the inter-college transfer process. Former and current non-degree students cannot use this application. They must apply through the Admissions Office using the formal admissions process.

## INSTRUCTIONS AND DEADLINES

Please: 1) Complete this form 2) a degree audit or a transcript 3) Submit both this completed application and transcripts from all post-secondary institutions attended to the appropriate office in the college to which you are applying.

*College of Liberal Arts / College of Science and Mathematics:* Assistant Director of Undergraduate Education, Office of Undergraduate Education, Campus Center 2-2100. Deadline for submission of this form is the end of the add-drop period each semester.

*College of Management:* CM Welcome Center, McCormack Hall, 5<sup>th</sup> floor, room 603. CM has a rolling admissions policy. Inter-college transfer applications are evaluated between January 1 and April 1 for the fall semester, and between June 1 and October 1 for the spring semester.

*College of Nursing and Health Sciences:*

Dept. of Nursing: Student Affairs Specialist, CNHS, Science Building, 2<sup>nd</sup> floor, room 02-15G. The nursing program accepts inter-college transfer applications for both the fall and spring semesters; the deadline for the spring semester is November 1, and the deadline for the fall semester is February 1.

Dept. of Exercise and Health Sciences: EHS Program Coordinator, CNHS, Science Building, 2nd floor. EHS accepts inter-college transfer applications for both the fall and spring semesters. The deadline for the spring semester is November 1, and the deadline for the fall semester is July 1.

CNHS requires transcripts from all post-secondary institutions attended, including UMass Boston. Unofficial transcripts are acceptable.

*College of Public and Community Service:* CPCS Student Services, Wheatley Building, 4<sup>th</sup> floor, room 151. The College of Public and Community Service has a rolling admissions policy.

**It is the student's responsibility to fulfill all conditions set by the college of application. You will be notified by mail by the college of application when a decision has been made.**

## 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.

**PLEASE NOTE: STUDENTS WHO ARE CURRENTLY WITHDRAWN AND APPLYING FOR AN INTER-COLLEGE TRANSFER FROM THE UNIVERSITY MUST SUBMIT A \$25 NON-REFUNDABLE APPLICATION FEE AND AN APPLICATION FOR READMISSION WITH THIS APPLICATION.**

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IMPORTANT: Complete each item. Incomplete forms will not be processed. Please PRINT.

Name: \_\_\_\_\_  
*Last* *First* *Middle*

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Telephone Number (where you can be reached during the day): ( \_\_\_\_\_ ) \_\_\_\_\_

List All Colleges Attended	Dates Attended	Dates Degree Awarded
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Current College and Major: \_\_\_\_\_

College to which you are applying: \_\_\_\_\_

Intended Major/Track/Concentration (Cannot be "Undecided" for CLA/CSM): \_\_\_\_\_

Has prior application for inter-college transfer been made? Yes  No

If yes, date of request: \_\_\_\_\_ To which college: \_\_\_\_\_

Are you currently enrolled at UMass Boston? Yes  No

If yes, list courses for which you are registered:

1. \_\_\_\_\_ 2. \_\_\_\_\_
3. \_\_\_\_\_ 4. \_\_\_\_\_
5. \_\_\_\_\_ 6. \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## PERSONAL STATEMENT

If you are applying to CLA, CSM, CPCS or CNHS, please provide a written statement clearly expressing your reasons for requesting an inter-college transfer. If additional space is required, please attach extra pages to this application. Be sure to print your name and student ID number on any additional pages before attaching them to this form.

COLLEGE USE ONLY

Number of graduation credits earned: \_\_\_\_\_

Number of semesters at UMass Boston: \_\_\_\_\_

Current academic status:  ACTIVE  WITHDRAWN

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Name of College \_\_\_\_\_

Name of New Major/Concentration \_\_\_\_\_

Acceptance Effective  SPRING  FALL 20 \_\_\_\_\_

Denied \_\_\_\_\_

Notification Date \_\_\_\_\_

Signature of College Official \_\_\_\_\_

Date \_\_\_\_\_