

Full-Time/Part-time Program Transfer Request Form

A student may seek approval from the Academic Affairs Office to transfer from the part-time program to the full-time program or from the full-time program to the part-time program. The request deadline is the first day of the Administrative Week of the semester for which you seek a transfer.

Last Name: [] First Name: []

CUNYfirst id: []

Signature: [] Date: []

Current Class Year: 1L [] 2L [] 3L [] 4L [] Current Program: Full-time [] Part-time []

Semester Seeking to Transfer: Semester _____ Year _____ Full-time [] Part-time []

Transferring between programs may have an impact on course registration and the length of completion of your degree.

(To be Completed by the Office of Academic Affairs Only)

Required Courses to be Taken in the Next Year After Transfer to New Program:

Table with 3 columns: Course Name, Credits, Semester to be Taken. Contains 6 empty rows for data entry.

Approved [] Denied []

Senior Associate/Assistant Dean for Academic Affairs signature

Date