

APPLICATION TO TRANSFER DEPARTMENTAL CONCENTRATION

Princeton, NJ 08544

A junior may transfer from one department to another only with the consent of the appropriate department and with the approval of the Committee on Examinations and Standing. Such transfers are normally not possible after the beginning of the second term of junior year. If allowed to transfer, a student must meet all the requirements set for members of the same class in the department to which he or she transfers.

1. Name _____ Class _____

Campus address _____ Frist mailbox # _____

Campus phone _____ PUID _____

2. Current department _____

3. Department applied to _____

4. Brief statement of reasons for seeking transfer:

Date _____

Signed _____
(Student's signature)

5. Acknowledgement of departmental representative in **CURRENT** department:

Date _____

Signed _____
(Current departmental representative's signature)

PLEASE COMPLETE REVERSE SIDE AND RETURN FORM TO **YOUR COLLEGE OFFICE**

ACTION OF THE DEAN OF THE COLLEGE:

Approved

Disapproved

Date _____

Signed _____
(Dean's signature)

MUST BE COMPLETED BY STUDENT AND NEW DEPARTMENTAL REPRESENTATIVE

6. Prerequisites for new department which you have previously completed or in which you are currently enrolled:

1. _____
2. _____
3. _____
4. _____

Courses to be counted as departmentals which you have previously completed or in which you are currently enrolled:

1. _____
2. _____
3. _____
4. _____

7. Proposed course schedule to fulfill University and departmental requirements:

List all courses needed to fulfill remaining departmental, University distribution, and language requirements in the terms in which you plan to complete them.

Junior Year

Fall

Spring

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Senior Year

Fall

Spring

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

8. Approval of departmental representative in **NEW** department:

Schedule of completion of Junior Independent Work: (Departmental representative should check appropriate options.)

1. Regular schedule for Fall? Yes _____ No _____ Spring? Yes _____ No _____
2. Fall term JIW from former department meets the requirements of new department?
Yes _____ No _____.
3. Extension for fall term JIW recommended? Yes _____ No _____ Spring? Yes _____ No _____

If yes, suggested completion date _____
(All extensions on Independent Work must be approved by the dean to be official.)

Date _____ Signed _____
(New departmental representative's signature)