



Internal Transfer: Undergraduate

Purpose: Used by currently enrolled students who wish to change colleges and **have not been dismissed** from their current college. If you **were dismissed** use the [Academic Censure/Satisfactory Academic Progress Appeal: Undergraduate](#) form.

Student Instructions:

- Complete Sections 1-3 of this form using a computer.
 - a **handwritten form will not be accepted.**
 - an incomplete form without the required documents attached will not be processed and returned to you for completion.
- Print the form using the 'Print Form' button.
- Sign the form in Section 4; a digital signature is **not** acceptable.
- Submit the completed form via one of the methods listed at the bottom of this form.
- Once your application has been processed, the Office of the Registrar will contact you.

Note:

- transcripts are **not** accepted if delivered by the student, they **must** be received via mail directly from the high school or institution's record office.
- Bursar or Student Affairs holds must be cleared with the appropriate office **before** readmission.
- for all majors, except the Nursing major and the Speech Pathology and Audiology major, the completed application and all required documents must be received by the Office of the Registrar **no later than one week prior** to the start of the session in which you wish to enroll. Consult the [Academic Calendar](#) for the session dates.
- internal transfer requests are accepted for the Speech Pathology and Audiology major for the Fall term **ONLY**; the deadline to submit the completed application and all required documents to the Office of the Registrar is May 1st.
- the deadlines to submit internal transfer requests for the Nursing major are: **Fall term - May 1st and Spring term - December 1st.** Submit the completed application and all required documents to the Office of the Registrar by these dates for consideration.

Section 1: Student Information

Name _____
Last First Middle

Former Name(s) _____
DOB MM/DD/YYYY

Mailing Address _____
Street City State Zip Code

Email _____@marquette.edu SSN/MUID _____ Phone _____

Were you dismissed from Marquette in your last semester due to poor academic performance? Yes No
If yes, see Purpose under form title. Term/Year

Section 2: Transcript Information

The Office of the Registrar must have an official transcript on file from the high school listed below and every institution you have attended.

Name of the High School from which you graduated _____ City and State _____

Name of other institutions you have attended _____ City and State _____

Name of other institutions you have attended _____ City and State _____

If you have attended more than two institutions other than Marquette, attach additional pages.

Section 3: New College Information

College in which you wish to enroll (check one):

- Arts & Sciences
- Business Administration
- Communication
- Education
- Engineering
- Health Sciences
- Nursing

Degree status (check one):

- Degree-Seeking: 1st Bachelor's
- Degree-Seeking: 2nd Bachelor's

In which term do you first intend to enroll?

- Fall
- Spring
- Summer

Expected Graduation Term _____

Desired Major _____

Desired Minor _____

Section 4: Student Statement/Signature

I hereby request an internal transfer and I understand that the college into which I request this transfer has the final decision, as per University policy.

Signature _____ Date _____