

## APPLICATION FOR UNDERGRADUATE CHANGE OF COLLEGE

**DIRECTIONS**—Use this application to request a change from your current University of Minnesota college or campus to a different undergraduate college or campus at the University. Please print clearly and complete each section thoroughly. Incomplete applications will delay processing and admission decisions. If you have never attended a U of M campus as a degree-seeking student, you must apply through the admissions office on the campus you wish to attend.

### APPLICATION SUPPLEMENTS ARE REQUIRED BY THE FOLLOWING TWIN CITIES PROGRAMS:

- Carlson School of Management—available at <http://z.umn.edu/csomtransfer>
- Medical Laboratory Sciences - available at <http://z.umn.edu/mlstransfer>
- College of Education and Human Development—available at <http://z.umn.edu/cehdtransferadmissions>
- Dental Hygiene—available at <http://z.umn.edu/dhtransfer>
- School of Nursing—available at <http://z.umn.edu/nursetransferadmissions>

### ADDITIONAL INSTRUCTIONS:

- Applications for programs on the Twin Cities campus are not accepted for every term. Check the web (<http://z.umn.edu/changeapps>) for more information.
- You must list any majors or minors you wish to continue on this form, or they will be dropped. You may not continue major(s) or minor(s) if you are transferring from one campus to another.
- If you have attended any post-secondary institution **other than the University of Minnesota (all campuses)**, you must submit an official transcript from each institution (in a signed and sealed envelope with this application).
  - **Exception:** If you are changing colleges on the same campus, and you have already submitted those official transcripts to your campus, you do not need to send them again.
- This application is valid only for the year and term you indicate. If admitted, you must register in your new program to complete your transfer. Failure to register will nullify your admission, and you will be required to file a new application.
- If you are transferring from one campus of the University to another campus (e.g., from the Twin Cities to Duluth), and you have already registered for the next term, you must cancel all classes on your old campus after you are admitted to your new campus. You will not be able to register in your new campus until you have canceled those classes.
- If you choose to apply to more than one college, you will need to submit a separate form for each. If you are accepted to both colleges, you will be contacted in order to confirm that you are admitted to your first choice college.
- **If you wish to withdraw this application, you must notify the Registrar's office on the campus to which you have applied or you will not be able to continue in your current college.**

### ADMISSION DECISION:

Admission decisions and notifications for all programs usually take place 4-6 weeks after the deadline for the term.

Applications to the following Twin Cities programs are pooled: Dental Hygiene; Medical Laboratory Sciences; Mortuary Science; Nursing; Carlson School; and College of Design. Action will be taken only after the college admission committee has reviewed all applications.

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**DIRECTIONS**—Use this application to request a change from your current University of Minnesota college or campus to a different undergraduate college or campus at the University. Refer to the instruction sheet on the first page of this pdf document.

office use only     IUT     ICT    application # \_\_\_\_\_    initial \_\_\_\_\_    date \_\_\_\_\_

To ensure privacy online, open in Adobe Reader (free at Adobe.com). Please add the required signature(s) in blue or black ink.

## PART A. Student information

Name Last		First	Middle		
ID number	Birthdate (mm/dd/yyyy)	Email address		Fax number	
Current mailing address (include apartment number)		City	State	Zip code	Phone number ( )
Permanent mailing address (if different from above)		City	State	Zip code	Phone number ( )
State of legal residency	How long have you lived in that state?	Are you an international student? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, what is your visa type? <input type="checkbox"/> F-1 <input type="checkbox"/> F-2 <input type="checkbox"/> J-1 <input type="checkbox"/> Other: _____			

## PART B. Transfer information

Transfer from (U of M campus <b>and</b> college)	Current major	Term and year you last attended this college <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer 20__
Transfer to (U of M campus <b>and</b> college)	Major(s) desired	Term/year you want to begin (check only one) <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer 20__
List any currently declared major(s) or minor(s) you wish to continue		

Have you attended any post-secondary institutions other than the University of Minnesota (any campus)?  yes  no  
If yes, list the institution's name, location, and dates attended below. You may need to provide official transcripts (see instructions).

Institution	Location	Dates attended
		_____ to _____
		_____ to _____

List the classes you have in progress. **Exclude University of Minnesota classes.** When completed, forward official transcripts to the University of Minnesota.

Term/year	Department	Course number	Course title	Credits	Term/year	Department	Course number	Course title	Credits

## PART C. Certification

Student signature				Date	
office use only					
decision	<input type="checkbox"/> accepted <input type="checkbox"/> not accepted	conditions	by	date	notes
application received:	application referred:	application decision:	application matriculated:		
date: _____	date: _____	date: _____	date: _____		
initials: _____	initials: _____	initials: _____	initials: _____		
term activation:	discontinue:	letter sent:			
date: _____	date: _____	date: _____			
initials: _____	initials: _____	initials: _____			



To request copies of this form in an alternative format, please call a Disability Resource Center liaison at 612-625-9578. The University of Minnesota is an equal opportunity employer and educator. This form is printed on paper made from no less than 20 percent post-consumer waste.



**APPLICATION FOR UNDERGRADUATE CHANGE OF COLLEGE**

<b>Please mail application to the campus to which you are applying:</b>		
<p>Crookston Office of Admissions Suite A Owen Hall 2900 University Ave Crookston, MN 56716</p>	<p><b>Duluth</b> <b>One Stop Student Services Center</b> University of Minnesota Duluth 1049 University Drive Duluth, MN 55812-3011</p>	<p><b>Twin Cities</b> <b>Office of the Registrar</b> email: otr@umn.edu</p>
<p><b>Morris</b> <b>Office of the Registrar</b> 212 Behmler Hall 600 East 4th Street Morris, MN 56267</p>	<p><b>Rochester</b> <b>Office of Admissions</b> 300 University Square 111 South Broadway Rochester, MN 55904</p>	

<b>Applications may also be dropped off at these locations:</b>		
<p><b>Crookston</b> <b>Office of Admissions</b> Suite A Owen Hall 2900 University Ave Crookston, MN 56716</p>	<p><b>Duluth</b> <b>One Stop Student Services</b> 23 Solon Campus Center 1117 University Drive Duluth, MN 55812</p>	<p><b>Twin Cities</b> <b>East Bank:</b> <b>Office of the Registrar</b> 160 Williamson Hall 231 Pillsbury Dr. SE Minneapolis, MN 55455-0252</p> <p><b>St. Paul:</b> <b>One Stop Student Services</b> 130 Coffey Hall 1420 Eckles Avenue St. Paul, MN 55108-6054</p>
<p><b>Morris</b> <b>Office of the Registrar</b> 212 Behmler Hall 600 East 4th Street Morris, MN 56267</p>	<p><b>Rochester</b> <b>Office of Admissions</b> Suite 326 300 University Square 111 South Broadway Rochester, MN 55904</p>	