

Degree/Program Transfer

This form is required for a transfer from one degree or program to another.

A transfer from a doctoral program to a master's program requires a letter of substantive rationale by the Graduate Coordinator, for SGS approval. If approval is granted for transfer from a doctoral to a master's program, readmission to a doctoral program is considered non-standard and would require SGS approval.

Some programs/departments have deadlines by which to apply for a transfer. Consult the department for their deadlines. For transfers to OISE from other U of T departments, it is your responsibility to have your home department forward appropriate documentation (e.g., transcripts submitted with original application, reference letters, etc.) to the Office of the Registrar and Student Services.

Note: A change of program may have minimum degree fees implications. The minimum degree fee is based on the year you began your studies using the fee for the new degree. More at: www.sgs.utoronto.ca/currentstudents/Pages/Graduate-Fees.aspx

Last Name:	First Name(s	Student Number:		
U of T Email:		Session:		
Section 2: Degree/Program	Transfer (To be completed	d by the student and the graduate unit(s)).		
Trans	fer From:	Transfer To:		
Graduate Dept:		Graduate Dept:		
Degree:		Degree:		
Full-time	Part-time	Full-time Part-time		
Program:		Program:		
If applicable, is the student contin	uing in the same collaborative pr	rogram(s)? No Yes		
Name of Current Collaborative P	rogram:			
Type of Transfer:				
Master's to Doctoral		Other, specify:		
Doctoral to Master's	(Non-standard—requires a letter	of substantive rationale by the Graduate Coordinator, for SGS approval.)		
Effective Session of Transfer:				
Lifective Session of Transfer.		Summer, 20		

Total Number of Courses required in New Program:		Faculty Advisor:		
*Course(s) to be EXCLUDED in Transfer:				
Course Number(s)	Course/Activity Title(s) Session Code		Session Code(s	s)
Rationale for program transfer (To be com	pleted by Graduate Coordin	ator of the graduate uni	the student is tra	ansferring from):
If transfer is to a new degree, I am aware to	Date:			
Student's Signature: (sign)				
Graduate Coordinator's Signature, of the graduate (sign and print name)		Graduate Unit:		
				Date:
Graduate Coordinator's Signature, of the graduate (sign and print name)		Graduate Unit:		
				Date:
Section 3: SGS/Registrar's Office Ap	oproval			
Request for Program Transfer:	pproved	Denied		
Signature		Date:		
Change from:				1
Change to:		Effective Date:		

Freedom of Information and Protection of Privacy Act: www.rosi.utoronto.ca/fippa.php