## University of Minnesota

# **Application for Undergraduate Change of Campus**

- To transfer to **Crookston** from another UMN campus, go to admissions.crk.umn.edu/apply.
- To transfer to **Duluth** from another UMN campus, go to d.umn.edu/undergraduate-admissions/apply.
- To transfer from one college to another within the Twin Cities campus, go to z.umn.edu/changeapps.

Use this application to request a change from your current University of Minnesota campus to a different undergraduate program and 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 z.umn.edu/csomtransfer
- Medical Laboratory Sciences—available at z.umn.edu/mlstransfer
- College of Education and Human Development—available at z.umn.edu/cehdtransferadmissions
- Dental Hygiene—available at z.umn.edu/dhtransfer
- School of Nursing—available at z.umn.edu/nursetransferadmissions

### **Additional instructions**

- Applications for the programs on the Twin Cities campus are not accepted for every term. Check online (http://z.umn.edu/changeapps) for more information.
- 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).
- 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 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 within a campus, 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.

### Please mail to or drop off your application with the campus to which you are applying

# Crookston Apply online:

admissions.crk.umn.edu/apply

When you apply to transfer from another UMN campus to Crookston you will not be charged an application fee.

# Morris Office of Admissions 600 Fast 4th Street

600 East 4th Street Morris, MN 56267

### Duluth

### Apply online:

www.d.umn.edu/undergraduateadmissions/apply

When you apply to transfer from another UMN campus to Duluth you will not be charged an application fee.

### Rochester Office of Admissions

300 University Square, Suite 326 111 South Broadway Rochester, MN 55904 Twin Cities (by email)

otr@umn.edu

(by mail & in person)
Office of the Registrar

160 Williamson Hall 231 Pillsbury Dr. SE Minneapolis, MN 55455-0252

West Bank (in person)
One Stop Student Services
130 West Bank Skyway 219
19th Avenue S Minneapolis,
MN 55455

### University of Minnesota

office use only

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Use this application to request a change from your current University of Minnesota campus to a different undergraduate program and campus at the University. Refer to the instruction sheet on the first page of this pdf document.

date\_

• To transfer to **Crookston** from another UMN campus, go to <u>admissions.crk.umn.edu/apply</u>.

application # \_\_\_\_

- To transfer to **Duluth** from another UMN campus, go to <u>d.umn.edu/undergraduate-admissions/apply</u>.
- To transfer from one college to another within the Twin Cities campus, go to z.umn.edu/changeapps.

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									Middle					
Last ID number Birthdate (mm/dd/yyyy					<u> </u>		First Email address					Middle Fax number		
ID Humber	1	Littali address						I ax ilullibel						
Current mailing address (include apartment number)							City State			State	Zip code	Phone number		
												( )		
Permanent mailing address (if different from above)							City State			State	Zip code	Phone number	er	
												( )		
State of legal residency How long have you lived in that state?							Are you	ı an internatio						
							Are you an international student?							
PART B. Transfer information														
Transfer from (U of M campus) Transfer from (					f M college)	C	Current major				Term and year	Term and year you last attended this college		
											☐ Fall ☐ Spr	☐ Fall ☐ Spring ☐ Summer 20		
Transfer to (U of M campus) Transfer to				o (U of M college)			Major(s) desired			Term/year you	Term/year you want to begin (check only one)			
											☐ Fall ☐ Spr	oring Summer 20		
Have you attended any post-secondary institutions other than the University of Minnesota (any campus)?  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 Minnes													Minnesota.	
Term/year	Department	i C	Course number		Course title	Cre	dits	Term/year	Dep	partment	Course number	Course title	Credits	
DADTC	Contific	1 0 1												
PART C. Certification Student signature  Date														
Student signa								Date						
office use only														
decision	- Canditions									У	date	notes		
					Academic plan:				s	Subplan:				
application received: application referred					: ;	applica	cation decision:			pplication	matriculated:			
date:			date:			date: _				date:				
initials:			initials:			initials: initials:								
term activation	discontinue:				er sent:									
date:			date:			date:								
initials:		initials:			initials:									

To request copies of this form in an alternative format, please call Disability Resource Center liaison at 612-625-6166. 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.

