

The University of Portland

Office of the Registrar
5000 North Willamette Boulevard
Portland, Oregon 97203
(503)943-7321

Request for Transfer Within the University

1. Fill out all required fields (*). Handwritten forms will not be accepted.
2. Print the form (sign and date).
3. Return completed form to appropriate Dean's Office.

*Name: _____

*ID: _____

***I wish to transfer from the College/School of: (check one)**

CAS Business Education Engineering Nursing

***To the following school with a degree and major in:**

(check only one college and one degree and then select a major beside it)

<input type="checkbox"/> CAS	<input type="checkbox"/> BA <input type="checkbox"/> BS	<input type="checkbox"/> Business	<input type="checkbox"/> BBA
<input type="checkbox"/> Education	<input type="checkbox"/> BAED <input type="checkbox"/> BSSE	<input type="checkbox"/> Engineering	<input type="checkbox"/> BSCE <input type="checkbox"/> BSCS <input type="checkbox"/> BSEE <input type="checkbox"/> BSME
<input type="checkbox"/> Nursing	<input type="checkbox"/> BSN BS		

***My reason for transfer at this time is:**

Student signature: _____ Date: _____

*UP Email Address: _____ Cell Phone : _____

Decision of Dean of College/School **from** which student is transferring.

Transfer Approved Transfer disapproved

Recommendations or remarks: _____

Signature of Dean: _____ Date: _____

Decision of Dean of College/School **to** which student is transferring.

Transfer Approved Transfer disapproved Original Bulletin Current Bulletin

Recommendations or remarks: _____

Signature of Dean: _____ Date: _____

Transferred semester hours: _____

Upon completion please return all copies to the Office of the Dean of your current major.

Students will be informed via email when they can view curriculum changes on their self-serve account.