

**.168.5.12Salale University**

**Office of the Registrar**

**Transfer Request form for Internal Transfer**

Name of the student: \_\_\_\_\_ ID.No. \_\_\_\_\_

Class year \_\_\_\_\_ Semester \_\_\_\_\_ SGPA \_\_\_\_\_ CGPA \_\_\_\_\_

First assigned Department \_\_\_\_\_ College \_\_\_\_\_

Department Requested for Transfer \_\_\_\_\_ College \_\_\_\_\_

Reason for transfer (evidence must be attached)

\_\_\_\_\_

\*Comments and suggestion of Department requested for transfer

\_\_\_\_\_

**a.** Approval of the College Dean of the applicant first assigned

Signature \_\_\_\_\_ Date \_\_\_\_\_ Seal \_\_\_\_\_

**b.** Decision by the college requested for transfer (*Request: accepted, rejected, pending*)

Class year \_\_\_\_\_ Semester \_\_\_\_\_ recommended to join if accepted.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Seal \_\_\_\_\_

**c.** Approval by the Registrar:

Signature \_\_\_\_\_ Date \_\_\_\_\_ Seal \_\_\_\_\_

Fill in 4 copies: 1) department 1<sup>st</sup> assigned 2) Department requested for transfer 3) College registrar to be transferred 4) Main Registrar