

UNDERGRADUATE APPLICATION FOR INTERNAL TRANSFER WITHIN THE UNIVERSITY

For current degree-seeking students only



LOYOLA
UNIVERSITY CHICAGO

Fall Semester (Classes begin in late August)

Application Deadline: July 1

Spring Semester (Classes begin in mid-January)

Application Deadline: November 1

1. Name: _____
Last First Middle

2. Student ID Number: _____ 3. Loyola E-mail Address: _____

4. Permanent Address: _____
Number and Street City State ZIP Code / Country

5. Cell Phone: (_____) _____
Area Code Number

6. Local Address: _____
(if different from permanent) Number and Street City State ZIP Code

from _____ to _____
Month/Year Month/Year

7. College/School currently attending:

- | | |
|------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| <input type="checkbox"/> College of Arts and Sciences | <input type="checkbox"/> Marcella Niehoff School of Nursing |
| <input type="checkbox"/> Quinlan School of Business | <input type="checkbox"/> School of Environmental Sustainability |
| <input type="checkbox"/> School of Communication | <input type="checkbox"/> Parkinson School of Health Sciences and Public Health |
| <input type="checkbox"/> School of Continuing and Professional Studies | <input type="checkbox"/> School of Social Work |
| <input type="checkbox"/> School of Education | |

8. Expected graduation term (semester and year): _____

9. I am applying for internal Transfer to:

- | | |
|------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| <input type="checkbox"/> College of Arts and Sciences | <input type="checkbox"/> School of Environmental Sustainability |
| <input type="checkbox"/> Quinlan School of Business | <input type="checkbox"/> Marcella Niehoff School of Nursing |
| <input type="checkbox"/> School of Communication | <input type="checkbox"/> Parkinson School of Health Sciences and Public Health |
| <input type="checkbox"/> School of Continuing and Professional Studies | <input type="checkbox"/> School of Social Work |
| <input type="checkbox"/> School of Education | |

To apply for admission to the Marcella Niehoff School of Nursing (MNSON), you must submit a supplemental form with your application. For more details, please contact the office of the MNSON. Note that applications for the BSN program are only accepted for the fall semester.

Undergraduate Majors and Minors: <https://www.luc.edu/undergrad/academics/majors/>

10. Intended Major(s): _____

Note: If selecting Ad/PR or Film/Digital Media, select a track/concentration: _____
See list of tracks/concentrations under School of Communication at the website above.

11. Minor(s), if any, that you want to maintain or declare: _____

12. Please answer this question if you are applying for admission to the *School of Continuing and Professional Studies (SCPS)*:

Have you worked full-time for at least three years? Yes No

NOTE: Specific course credits awarded within a program are subject to the requirements and regulations of the admitting program and may vary from course credit previously awarded and from the total credit awarded.

NOTE for students adding "SECONDARY EDUCATION" within the School of Education: You must be a declared major within the College of Arts and Sciences in one of the following teaching fields to add "Secondary Education" as a multiple-degree program: English, History, Math, Political Science,* Psychology.* (*Requires a second teaching field.) Please add the School of Education multiple-degree program in Secondary Education to my current College of Arts and Sciences major (listed above). I understand that I must have at least a 2.50 cumulative grade point average and at least a 2.80 grade point average in my major to be accepted into the Secondary Education multiple-degree program.

This application must be signed by the applicant and is not valid if information is withheld or if misinformation is given. If admitted, the applicant agrees to comply with all the rules and regulations of the new College/School.

Signature: _____ Date: _____

Thank you for your application. Please return this form to the office of the College/School to which you would like to transfer. (See next page for locations and contact information.)

Thank you for your application. Please return this form to the office of the College/School to which you would like to transfer:

College of Arts & Sciences
Cuneo Hall 400, LSC
CASLOYOLA@LUC.edu

Quinlan School of Business
Schreiber Center 316, WTC
QuinlanUBUS@LUC.edu

School of Communication
51 E. Pearson, 2nd Floor, WTC
SOCAdvising@LUC.edu

School of Continuing & Professional Studies
Lewis Towers 401, WTC
SCPS@LUC.edu

School of Education
Lewis Towers 11th Floor, WTC
SOEAdvising@LUC.edu

School of Environmental Sustainability
BVM Hall 300, LSC
SES@LUC.edu

Marcella Niehoff School of Nursing
BVM Hall 800, LSC
schoolofnursing@LUC.edu

Parkinson School of Health Sciences & Public Health
SHSPHadvising@LUC.edu

School of Social Work
Maguire Hall 5th Floor, WTC
SOWK-Advising@LUC.edu

Revised 2024-2025

FOR OFFICE USE ONLY:

Received by: _____ Date Received: _____

Reviewed by: _____ Date Reviewed: _____

Admitted Conditionally Admitted Denied GPA (date reviewed): _____

- File/documents, if any, requested from sending school
- File/documents, if any, reviewed and uploaded to DocFinity
- Program changed; campus changed to "WTC" or "LSC"
- Maintain *Admit Term*: _____
- Plan changed

- College/School Academic Advisor changed or added (or maintain FSYA Academic Advisor with new Program)
- Navigate note added
- Student notified of decision
- Advisor and sending school copied on notification