

**OAKLAND UNIVERSITY  
PETITION FOR PROGRAM TRANSFER**

**GRADUATE STUDY**  
**520 O'Dowd Hall**  
Rochester, MI 48309-4401  
Phone: 248-370-2700

**Submit original completed form to Graduate Study, 520 O'Dowd Hall**

A student must be approved to transfer to the new program PRIOR to the beginning of an academic term in order for the admission to be effective for that term.

**Instructions:** This form is to be used only by OU students who have been admitted to one master's degree program and wish to transfer to another master's degree program. Please note that additional application material may be required. For example, the MBA program requires submission of scores from the GMAT as well as a supplementary application form; the Counseling program requires a personal statement, the MPA program requires a supplementary application, etc. These requirements are detailed in the Graduate Catalog and at [www.oakland.edu/grad](http://www.oakland.edu/grad).

**Please Note:** Regulations governing graduate programs require that all credit applied toward a degree must be earned within six (6) calendar years of the awarding of the degree.

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**To be completed by the Student:**

Name: \_\_\_\_\_ Grizzly Number: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

E-Mail Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Present Program: \_\_\_\_\_

Desired Program: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

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**To be completed by Department or School:**

Semester of Admission: \_\_\_\_\_ Program: \_\_\_\_\_

Admit       Admit with Academic Requirements       Delay       Deny

Comments: \_\_\_\_\_  
\_\_\_\_\_

Assigned Adviser: \_\_\_\_\_

Name (print or type): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**To be completed by Graduate Study:**

Semester of Admission: \_\_\_\_\_ Program: \_\_\_\_\_

Admit       Admit with Academic Requirements       Delay       Deny

Comments : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Director/Representative of Graduate Study: \_\_\_\_\_ Date: \_\_\_\_\_