

Use this form when applying to transfer to another faculty. Submit this form **the term before** you wish the faculty transfer to take effect. Submitting as early as possible is recommended; be aware of faculty deadlines.

Notes:

1. Applications are processed once grades from your qualifying term are available (if applicable).
2. Once your change is processed, your term fees, if already paid, may be updated. If you have opted out of some incidental fees for the term, you may need to do so again. Note that you will not be able to opt-out from any new optional or voluntary fees charged as a result of a program change processed after the opt-out deadline for the term.
3. Students requesting a transfer to the Faculty of Mathematics need to contact the Math Internal Transfer Advisor at math.ug.ita@uwaterloo.ca.

Instructions

1. Complete Sections 1 and 2.
2. Make an appointment with your home faculty advisor and complete Section 3 at or after your appointment.
3. Make an appointment with the [transfer advisor in your desired faculty](#). Submit your completed form at the appointment.

Section 1: Student information

Last name(s) _____ First name(s) _____
 Waterloo student identification number _____ Waterloo email _____

Section 2: Current faculty

Faculty of Arts Engineering Environment Health Mathematics Science

Section 3: Requested changes

New faculty Arts Engineering Environment Health Science

Academic program Honours Co-op Honours Regular 4-Year General 3-Year General

Major _____

Signature _____ Date _____

For Academic Advisor and Office of the Registrar Use Only – Faculty transfer conditions and approvals

For term: Fall Winter Spring Year _____

Conditions required to be admitted or have been met

Averages: CAV _____ FAV _____ MAV _____ Petition required for ND term ELR met UCR needed

Other (e.g., number of fails, no INCs/repeats, course restrictions, etc.) _____

Courses to be enrolled in (incl. associated components) during ND term Qualifying term When admitted

Subject and catalog number (e.g., BIOL 130)	LEC section and class number (e.g., 001/4142)	LAB section and class number (e.g., 101/4143)	TUT section and class number (e.g., 201/4433)

Advisor(s) approval(s)
Home Faculty Advisor (if in non-degree term)

Academic Unit _____
 Name _____
 Extension _____ Date _____

Transfer Faculty Advisor

Academic Unit _____
 Name _____
 Extension _____ Date _____

Decision

Refused Defer to after ND Term Refer to _____

Admitted to _____ Academic level (e.g., 2B) _____

Indicate the Undergraduate Calendar requirements to be followed for the requested faculty transfer. Requirement term (e.g., 1209) _____