

**NOTICE OF INTENT TO TRANSFER**

\_\_\_\_\_  
Date this form is prepared & submitted for consideration

\_\_\_\_\_  
Student

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Work Phone (if any)

**I intend to transfer to a different course of study within this college or to a different college as indicated below.**

\_\_\_\_\_  
Current Course  
Name/Number

\_\_\_\_\_  
Current Program Name

\_\_\_\_\_  
Request to Transfer to Course Name/Number

\_\_\_\_\_  
Effective Date (mm/dd/yyyy)

\_\_\_\_\_  
Transferring To (school/campus name & office address)

\_\_\_\_\_  
School Contact Person (name & phone number)

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

\_\_\_\_\_  
Date

NOTE: school will contact you if we are unable to process your request due to your failure to comply with one or more of the school policies & or procedures as listed in the school catalog. Decision will be sent to your address listed above within 10 business days. You may contact the Student Services at (562) 864-0506 with any questions.

**FOR OFFICE USE ONLY**

\_\_\_\_\_  
Request APPROVED, Correction Posted Date

\_\_\_\_\_  
School Official's Signature

\_\_\_\_\_  
Request DENIED

\_\_\_\_\_  
School Official's Signature

\_\_\_\_\_  
Notes