

PROGRAM TRANSFER APPLICATION MASTER'S TO DOCTORAL LEVEL

Section A: Overview

A student who wishes to transfer into a Doctoral program before completion of their Master's program at Toronto Metropolitan University, isrequired to:

- be enrolled in a Master's program at TorontoMet University
- have completed all of the course requirements for the Master's degree with a minimum A-(3.67) average
- have demonstrated research potential
- sign the waiver below stating that they will not be eligible for the Master's degree if they do not complete the PhD.

Applications for a transfer must be submitted to the program director for approval before the first day of classes for the term in which the change is requested.

Section B: Application procedure

- Students must submit to their faculty advisor/supervisor:
 - a. this application,
 - b. a copy of current unofficial academic transcript or academic history
 - c. a letter providing detailed reasons for the application

Note: The approval process may take longer if the application documents are incomplete.

- 2. The Faculty Advisor/Supervisor will review the documents and recommend approval or disapproval (with comments) to the Program Director.
- 3. If approval is recommend by the Graduate Program Director, they will forward this application package and the transcript with **courses to be counted towards the PhD coursework requirement identified (See Section E)**, to the Vice-Provost and Dean.
- 4. The Vice-Provost and Dean will issue a written approval or disapproval to the student.

| Section C: Student information | | | | | | | | |
|--------------------------------------|----|-------|----------|--|--|--|--|--|
| Last Name, First Name: | | | | Student ID: | | | | |
| Program (e.g., Fashion MA): | | | | | | | | |
| Current status: | FT | PT | Inactive | First term of registration in Master's program | | | | |
| Supervisor's name | | Term: | Year: | | | | | |
| Change request to: Full-time PhD in: | | | effec | tive: | | | | |

Waiver: If approved into the above named Doctoral program before completion of my Master's degree, I agree to waive my rights to the Master's degree. If I fail to complete the doctoral degree, I understand that I won't be eligible to apply for reinstatement into the Master's program, nor will I be eligible to apply for the Master's degree, regardless of progress in the Doctoral program.

| Student Signature: | Date: |
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| Oludent Olundiale. | Date. |



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| Student Last Na | me, First Name: | | Student ID: | | | | | |
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| Section D: Approvals (in sequence) | | | | | | | | |
| Supervisor (print name): | | | | | | | | |
| Approved | Denied | Signature: | | | Date: | | | |
| Graduate Program Director (print name): | | | | | | | | |
| Approved | Denied | Signature: | | | Date: | | | |
| Vice Provost and Dean | | | Approved | Denied | | | | |
| Signature: | | | | | Date | | | |
| Section E: Courses to be counted towards the PhD coursework requirement | | | | | | | | |
| Course code | Course title | Course title | | | | | | |
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Distribution: Student file Graduate admissions