



This form is required to change from one GCTS degree to another where permitted by GCTS policies. All other cases are treated as admissions applications. Do NOT complete this form if:

- courses from your current program do not transfer into the new program
- you are currently in a Basic Degree program

### Section 1 – Student Information (to be completed by the student)

Last Name:	First Name:	Student Number:
Current College of Registration:		UofT Email:
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Year of Study:	

### Section 2 – Degree Change Information (to be completed by the student)

New Program:	Requested Effective Session: Session:                      Year:
Student Signature:	Date:

### Section 3 – Approvals

Effective Date of Transfer:	Year of Study in new Program:			
Courses recommended for transfer (list course codes only; a separate sheet may be appended)				

Please Indicate Recommendation: <b>Approved / Declined</b>	College Graduate Director Signature:	Date:
Please Indicate: <b>Approved / Declined</b>	GCTS Signature:	Date:

Personal information is collected for the purpose of admission, registration, academic programs, university-related student activities, activities of student societies, safety, financial assistance and awards, graduation and university advancement, and reporting to government.

At all times it will be protected in accordance with the Freedom of Information and Protection of Privacy Act.

If you have questions please contact the TST Registrar, Toronto School of Theology, 47 Queen’s Park Crescent East, Toronto, ON, M5S 2C3 or call 416-978-4040.

<b>Office Use:</b>	<input type="checkbox"/> College Registrar	<input type="checkbox"/> USMC Registrar (for change to non-conjoint PhD)
	<input type="checkbox"/> Student	<input type="checkbox"/> College Graduate Director <input type="checkbox"/> GCTS Office
Date Entered on ROSI by college registrar: _____		