



## **University/Curriculum Transfer Request Form**

## To be filled by Applicant (fill carefully):

1. Personal and Academic Informa	tion from the Origina	al University:	
First Name: F. Name:		G.F Name:	
ID No.: Ad	cademic Year:	Year of Study:	Semester:
Transfer from (University/Institution):		National ID	
Faculty/School/College:		_Department:	
Degree Program: BSc□	MSc□ Ph	nD□	
Admission Type: Regular□	Extension/Weeker	nd□ Summer□	Distance□
Academic Status: Active Studer	nt □ Withdrawal[	Other:	
2. Reason for Transfer:			
3. Information of the new Universi Transfer to (University/Instituti			
Faculty/School/College:	e:Department:		
Admission type: Regular□	Extension/Weeke	nd □ Summer□	Distance□
Academic Year: Year	ear of Study:	_ Semester:	
1. The concerned body who reque	st/allowed the transf	er:	
Name of Organization:			
Reference Number of Letter:		Date:	
Country:	City	<b>/</b> :	
5. Applicant's Phone Number:		Signature:	Date:
For Office use only:			
Service issued by:		Sign:	Date:
Approved by:		Sign:	Date:
Required documents (select From Bahir Dar University to other □ Supporting Letter from concerne □ Cost sharing agreement (for reg □ Service Fee Receipt □ Clearance □ Official Transcript □ University Identity Card	ed body ular BSc)	From other to Bahir Da  Supporting Letter from Cost sharing agreen Service Fee Receipt Official Transcript Biography Form Academic Credentia	om concerned body nent (for regular BSc)



