

PROGRAM TRANSFER REQUEST FORM

For Transfer from the MC to the MAMFT Program

Name (print)_____

Current GPA in ACTS_____

Year of Admission into the MC_____ Level of Admission to MC_____

Number of Credits remaining to complete the MC_____

Courses needed for MAMFT: Child and Adolescents ____ MFT II ____ CLG 695 ____

Please outline your reasons for transfer into the MAMFT program:

I hereby formally request transfer from the Master of Counselling (MC) program to the Master of Arts in Marriage and Family Therapy (MAMFT) program.

Signed_____

Note: *No Applications will be processed unless they contain completed:*

1. Program Transfer Request Form (this page) signed.
2. Your completed MAMFT Program Inventory.
3. A non-refundable cheque made out to "ACTS" for \$100.00.

In addition please note:

4. Date of AMFTRB practice exam: _____ Completed: Y N. Score: _____
5. Date of Submission of Graduate Essay: _____ Completed: Y N. Pass: Y N
6. Any additional questions should be typed and attached to this application.