

INTEGRATED BIOMEDICAL ENGINEERING AND HEALTH SCIENCES PROGRAM iBioMed Advisement

TRANSFER TO GRADUATE: EXIT DEGREE APPLICATION FORM
DEADLINE: May 20th (Spring Convocation) or September 15th (Fall Convocation)

STUDENT NAME: _____ STUDENT NUMBER: _____
McMASTER EMAIL ADDRESS: _____ PHONE NUMBER: _____

CURRENT PROGRAM AND LEVEL: _____

PLEASE INDICATE YOUR LAST TERM OF ENROLMENT: Fall Winter Spring/Summer

EXIT DEGREE TO DECLARE: B.H.Sc. Degree from the Health, Engineering Science & Entrepreneurship Specialization
(select one) B.A.Sc. Degree from one of the B.Eng.BME Biomedical Engineering Streams

LEVEL COMPLETED IN CURRENT DEGREE: LEVEL 3 LEVEL 4
(select one)

(OPTIONAL) ARE YOU PURSUING FURTHER EDUCATION? IF SO, WHERE AND WHAT PROGRAM:

Please briefly describe why you would like to transfer to graduate with an exit degree.

Student Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Received by: _____ Date: _____

Processed by: _____ Date: _____