



EMPIRE STATE COLLEGE

Readmittance Internal Transfer Request Form (RITF)

(Complete and submit to Admissions)

Name _____ Student ID# _____ Date _____

Address _____

State _____ Zip _____ E-mail address _____

Work phone _____ Home phone _____

Transferring from (check the appropriate space)

- | | |
|--|---|
| <input type="checkbox"/> Central New York Center | <input type="checkbox"/> Northeast Center |
| <input type="checkbox"/> FORUM Central | <input type="checkbox"/> FORUM East |
| <input type="checkbox"/> Genesee Valley Center | <input type="checkbox"/> Center for Distance Learning |
| <input type="checkbox"/> Hudson Valley Center | <input type="checkbox"/> The Harry Van Arsdale Jr. |
| <input type="checkbox"/> Long Island Center | <input type="checkbox"/> Center for Labor Studies |
| <input type="checkbox"/> Metropolitan Center | <input type="checkbox"/> Verizon Corporate College |
| <input type="checkbox"/> Niagara Frontier Center | |
| <input type="checkbox"/> FORUM West | |

Transferring to (check the appropriate space)

- | | |
|--|---|
| <input type="checkbox"/> Central New York Center | <input type="checkbox"/> Northeast Center |
| <input type="checkbox"/> FORUM Central | <input type="checkbox"/> FORUM East |
| <input type="checkbox"/> Genesee Valley Center | <input type="checkbox"/> Center for Distance Learning |
| <input type="checkbox"/> Hudson Valley Center | <input type="checkbox"/> The Harry Van Arsdale Jr. |
| <input type="checkbox"/> Long Island Center | <input type="checkbox"/> Center for Labor Studies |
| <input type="checkbox"/> Metropolitan Center | <input type="checkbox"/> Verizon Corporate College |
| <input type="checkbox"/> Niagara Frontier Center | |
| <input type="checkbox"/> FORUM West | |

I do ___ / do not ___ have an approved degree plan.

My primary mentor was _____

Completion date of last enrollment _____

Proposed start date at new center/program _____

Signature of student _____ Date _____

E-mail: admissions@esc.edu

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