

Program in Occupational Therapy

Performance Site Transfer Request

Type in the fields below, print out completed form, and sign. Scan and return your completed form to otadvising@umn.edu. Questions? Contact CAHP Student Services: otadvising@umn.edu.

Performance Site - Currently		Name:	
Assigned To:		U of M ID Number:	Program:
Performance Site - Request for Change To:		Effective Semester:	Effective Year:
		Deadlines for Submission Spring Deadline: November 15 Summer Deadline: April 1 adline (current students only):	
			dividual circumstances. The Student Handbook for performance site transfer requests.
Brief Summary - Reason for Request (max. 350 words) This information will be considered in the event of multiple requests for limite spaces.			
			Additional documentation included (optional)
1 1		ve information is truthful and must be submitted via my U o	
			Date Received:
Request Approved	☐ Not Approved		Initials:
Program Director:		Date:	
Comments:			
Form location: Share Googl Last updated: 06/17/2024	e Drive>MLS&OT Student Services>I	Handbooks & Forms Updated in Pe spreadsheet: [ople Soft (if approved) and Date/Initials: