Mathematics Advanced Study Semesters Transfer Protocol Form

Please have your Academic Advisor complete this form.

	Please itemize the Transfer Protocol required by your university foro transfer to Penn State University for the fall semester.
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	Please itemize the steps required for the student to matriculate back to your university for the spring emester.
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. F	Please list any precautions for this specific student.
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Ac	dvisor's Signature Date
 Ac	dvisor's Printed Name and Title