Department of Kinesiology – Exercise Science Option
Application for Internal Transfer

Policy
Admission decisions on internal transfer into the Exercise Science Option will be made by the Exercise Science Faculty. **Space in the option is limited by availability of faculty and laboratory resources.**

Applications may be processed at any time during the semester. All decisions, however, will be made following the Fall or Summer semesters after a review of grades for the latest semester. Only completed applications will be considered. Failure to submit any required document, including semester grade reports, will invalidate the application. Applicants will receive a letter of acceptance or denial from the Department of Kinesiology chair. All decisions will be considered final.

Checklist/Criteria For Acceptance

☐ 1. Minimum UNH GPA of 2.75
☐ 2. Science Course Minimum GPA of 3.00
☐ 3. Minimum Grade of B- in each of the following:
   A. BMS 507
   B. BMS 508
   C. KIN 620
   D. Any completed required courses:

☐ 4. Letter of interest describing why you are seeking admission into Exercise Science
(See attached Standards for Continuing in the Exercise Science Option)

☐ 5. Interview with Coordinator (Date)

☐ 6. Previous and current semester grade reports
(within 1 week after issued)

☐ 7. Provide a Headshot Photo of yourself with your Application

Approved May, 2011
KIN: EXERCISE SCIENCE DISCLAIMER

I accept full responsibility for completing all option requirements in effect at the time of my acceptance by the Department of Kinesiology. I understand that some requirements may not appear in the current catalog. I further understand that problems in course availability and my schedule may delay my anticipated date of graduation. I also understand that the Capstone course (KIN 650A-Internship in Exercise Science; 8 credits) can only be completed after all required coursework is completed, which is always the Summer or Fall after the Spring semester of my Senior year.

Signature of Applicant ___________________________ Date ___________________________

Name (Please Print) ___________________________ Email ___________________________

Phone: ___________________________ UNH ID#___________________________

Address for Notification: __________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

________________________________________________  (    ) Accept (    ) Deny
Option Coordinator

Approved May, 2011