

TRANSIENT STUDENT FORM – University of South Florida

This form enables you to transfer credits of pre-approved courses ONE TERM ONLY.

IMPORTANT INSTRUCTIONS:

- 1) Check the institution you will be attending as a Transient Student, known as the Receiving School. Then complete and sign section A.
- 2) Ask your Academic Advisor to complete and sign Section B. The gold copy of this form may then be retained by your advisor for Departmental use.
- 3) Submit form to USF Registrar's Office (SVC1034) for completion of Section C. Three working days after submission, you may pick up the completed form. To receive the completed form by mail, staple a self-addressed stamped envelope to the form. You are responsible for submitting the white copy to the Registrar's Office at the Receiving School in accordance with the Receiving School's procedures.

RECEIVING SCHOOL:

- Florida A & M University, Tallahassee, FL 32307-3200
- Florida Atlantic University, Boca Raton, FL 33431-0991
- Florida Gulf Coast University, Ft. Myers, FL 33908-4500
- Florida International University, Miami, FL 33199-0001
- Florida State University, Tallahassee, FL 32306-1011
- University of Central Florida, Orlando, FL 32816-0114
- University of Florida, Gainesville, FL 32611-8140
- University of North Florida, Jacksonville, FL 32224-2645
- University of South Florida, Tampa, FL 33620-6900
- New College of Florida, Sarasota, FL 34243-2197
- University of West Florida, Pensacola, FL 32514-5750
- _____

COMPLETION OF THIS FORM DOES NOT CONSTITUTE REGISTRATION.

SECTION A: To be completed by student applicant. Do not leave any questions blank. Print with a ballpoint pen.

1. _____ 2. _____
Student ID Number Last Name First Name M.I.

3. **Transient:** 4. Birth date: _____ 5. Sex: M F 6. Nation of Citizenship: _____
Term: Fall _____ Spring _____ Summer _____
Section _____
Mo. / Day / Year

7. Address while attending USF (or Permanent address)
Street Address _____
City _____ State _____ Zip _____ Area Code _____ Telephone Number _____

8. Address during term of attendance as a transient student
Street Address _____
City _____ State _____ Zip _____ Area Code _____ Telephone Number _____

I understand that if I register for courses not approved herein, I assume the full risk of transferability. I also understand that this application is for the ONE TERM specified and that a new form with approved courses must be submitted in order to continue my Transient Student status. I also understand that I must provide USF with an official transcript from the Receiving School, and authorize the release of such records accordingly.

Signature of Student: _____ Date: _____

SECTION B: To be completed by Academic Advisor. Print with a ballpoint pen.

COURSE APPROVAL: The above-named student is hereby authorized to take the following course(s) during the one term specified. Transfer credit for these courses will be acceptable upon receipt of an official transcript as per the regulation of USF.

PREFIX	COURSE #	HRS.	COURSE TITLE	USF EQUIVALENCY
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

Signature of Academic Advisor: _____ Date: _____

_____ Credit hours of this approved transfer work will reduce the USF undergraduate degree requirement of earning 60 hours at a baccalaureate-granting institution.

Signature, ARC Representative

SECTION C: To be completed by USF Registrar's Office

- Y N The above named student is regularly enrolled in a degree program and is eligible to re-enroll.
- Y N This student has a Student Health Form on file indicating she/he has the required Measles and Rubella immunities.
- Y N This student has a Medical History Form on file.
- Y N This student does not have a CLAST hold.

This student has the required documentation on file with USF to meet the legal classification of:

- Florida Resident
- Non-Florida Resident
- Resident Alien
- Documented Alien

USF Validation

Signature of Registrar: _____ Date: _____