

# 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.
- 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  
\_\_\_\_\_  
Date: \_\_\_\_\_

Signature of Registrar: \_\_\_\_\_ Date: \_\_\_\_\_