

Status Change Request Form

SF Student ID: _____

Last Name: _____

First Name: _____

Change term attending from: _____ to _____

Change status from: Transient to Transfer (In-State)

Change status from: Transient to Transfer (Out-Of-State)

Change status from: Transfer to Transient*

Other: _____

Student Signature

Date

**Please return this form to the
Office of Admissions, R-101
on the NW campus
or fax it to:
352.395.7300
or email it to:
admissions@sfcollge.edu**