APPLICATION FOR INTERNAL TRANSFER

WESTFIELD STATE UNIVERSITY OFFICE OF THE REGISTRAR

Name:	Student ID:	
Major(s):	Phone:	

This form is for students wanting to change their student status. You **<u>must</u>** meet with the Student Accounts/Billing and Financial Aid offices to discuss how your student bill and financial aid *(if applicable)* would be impacted before submitting this form. If you are an athlete, contact the Athletics Department to determine how changing your student status may affect your eligibility to participate.

Seniors who are in their final semester and only need 11 or less credits to complete their degree should fill out an **XRG** Form, which can be obtained from the Registrar's Office in Scanlon Hall or on the Registrar's Office webpage.

Please review the information below before submitting this form to the Registrar's Office:

Student Status	Required Enrollment forMaximum Credits		# of Day Division Credits Allowed
	<u>Financial Aid Eligibility</u>	Allowed per Semester	<u>per Semester</u>
Full-Time/"Day"	12 credits minimum	18 credits maximum	All
Part-Time	6 credits minimum	11 credits maximum	9 Day Division credits maximum
Online Program	6 credits minimum	15 credits maximum	9 Day Division credits maximum

Any course section beginning with the number "0" is a Day Division section (ex: ENGL 0101-016 or ENGL 0101-002). Course sections beginning with the number "5" are Continuing Education sections (ex: ENGL 0101-501).

Please note that the **Online Program** is only available to the following majors: **Accounting, Criminal Justice, Liberal Studies, Management, Marketing, Psychology, and Sociology.** If you are switching into one of these majors and want to be in the online program, please submit the **Major Change Form** along with this form.

Current Student Status:	□ Full-Time	Part-Time	Online Program
I am requesting to transfer to:	□ Full-Time	□ Part-Time	□ Online Program
Effective Semester:	🗖 Fall	□ Spring	Year:

Indicate the date(s) you discussed with the following offices how your bill/financial aid will be affected:

Office	Contact Information	Date
Student Accounts (Full-Time Students)	studentaccounts@westfield.ma.edu 413-579-3090	
CE Billing (Part-Time/Online Students)	413-572-8020	
Financial Aid	financialaid@westfield.ma.edu 413-579-3080	

By signing below, I authorize the Registrar's Office to make the above changes to my student coding.

Student Signature

Date

Return to the Office of the Registrar, Scanlon Hall, 2nd Floor

Processed by: ____

Date processed: _____

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