

**UNIVERSITY OF SOUTH CAROLINA AIKEN**  
**REQUEST FOR CHANGE OF CAMPUS**

DATE: \_\_\_\_\_

STUDENT NUMBER ----

STUDENT NAME: \_\_\_\_\_  
Last First Middle

CURRENT MAJOR: \_\_\_\_\_

ADDRESS WHERE YOU WISH TO BE CONTACTED ABOUT THIS TRANSACTION: \_\_\_\_\_

PHONE: \_\_\_\_\_

NOTE: The reciprocal tuition agreement which allows Richmond and Columbia County, Georgia, residents to pay at the in-state tuition rate at USC Aiken does not apply to any other USC campus. Georgia residents will be assessed the out-of-state rate at the new campus.

**SECTION 1--REASON FOR REQUEST**

- RELOCATION
- FINANCIAL
- CAREER GOALS HAVE CHANGED AND NEW MAJOR IS NOT OFFERED AT USC AIKEN
- COMPLETION OF MAJOR I AM SEEKING IS NOT POSSIBLE AT USC AIKEN
- CONFLICT WITH A PROFESSOR AND/OR MY SCHOOL/DEPARTMENT
- OTHER. EXPLAIN: \_\_\_\_\_

**SECTION 2--CHANGE OF CAMPUS**--You must obtain the signatures requested and return to the Office of the Registrar for processing.

A. Request release from USC Aiken School or Department of \_\_\_\_\_  
Department where your current major is listed.

Release approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of USC Aiken School Head/Department Chair

Processed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of USC Aiken Registrar

B. Request transfer into College/Campus of \_\_\_\_\_ Code

Upper Division  Lower Division

With a major of: \_\_\_\_\_ Code

Degree of: \_\_\_\_\_ Code

Transfer approved: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Dean of the College/Campus accepting the student

Effective for:  Fall  Spring  Summer I  Summer II Year: \_\_\_\_\_

1ST COPY: NEW SCHOOL/CAMPUS      2ND COPY: USC AIKEN SCHOOL/DEPARTMENT