

**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 **must** 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:

<u>Student Status</u>	<u>Required Enrollment for Financial Aid Eligibility</u>	<u>Maximum Credits Allowed per Semester</u>	<u># of Day Division Credits Allowed 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, History, Liberal Studies, Management, Marketing, Psychology, and Social Work (hybrid)**. 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:

<b>Office</b>	<b>Contact Information</b>	<b>Date</b>
Student Accounts (Full-Time Students)	<a href="mailto:studentaccounts@westfield.ma.edu">studentaccounts@westfield.ma.edu</a> 413-579-3090	
CE Billing (Part-Time/Online Students)	413-572-8020	
Financial Aid	<a href="mailto:financialaid@westfield.ma.edu">financialaid@westfield.ma.edu</a> 413-579-3080	

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

\_\_\_\_\_ Date

**Return to the Office of the Registrar, Parenzo Hall Room 150**