



**University of Wisconsin-Stevens Point**

Office of the Registrar

1108 Fremont Street, Stevens Point WI 54481-3897  
715-346-4301; Fax 715-346-2558  
registrar@uwsp.edu

## Campus/Program Transition Form

**Student Name:** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

**Current Home Campus (Circle one)**

UW-Stevens Point - Main Campus    UW-Stevens Point at Wausau    UW-Stevens Point at Marshfield

**Current Major/Degree:** \_\_\_\_\_

**Intended Home Campus (Circle one)**

UW-Stevens Point - Main Campus    UW-Stevens Point at Wausau    UW-Stevens Point at Marshfield

**Intended Major/Degree:** \_\_\_\_\_

**Select the term you intend to begin taking classes on the intended home campus that you indicated above.**

- ☐ Fall Semester \_\_\_\_\_ (year)
- ☐ Winter Semester \_\_\_\_\_ (year)
- ☐ Spring Semester \_\_\_\_\_ (year)
- ☐ Summer Semester \_\_\_\_\_ (year)

**I acknowledge making this change may have cost and financial aid consequences and that to fully understand these implications, I should check with a Financial Aid Advisor and the Student Financial Services office.**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Return completed form to:**

Office of the Registrar  
1108 Fremont St.  
Student Services Center, Room 101  
Stevens Point, WI 54481  
Fax: (715) 346-2558

**Admissions Office  
Approval:**

**Initials** \_\_\_\_\_

**Date** \_\_\_\_\_