Transfer **From** and **To** an iStudy Course



Please complete the information on the form below. Your transfer cannot be processed until this form is received by the iStudy Office. Additionally, you must fill out a new course application, which will need to be signed by your academic dean's office. Your enrollment date will remain unchanged.

Name (please print)			Today's Date
Signature			UM Student Number
Mailing Address			
City	State	ZIP	
Original Course Number	Original Course Title / Instructor		
New Course Number	New Course Title / Instructor		
Reason for Transfer			
• B	If you would like to pay with APPLICATION Solid Person: deliving By Email: scan then emails By Fax: for the solid Pay Fax: for the solid	SUBMISSION IN ver to our office in ail form to our office ax the form to 662	Card, please call our office. NFORMATION: 102 Yerby Center. ce at istudy@olemiss.edu
• • • • • • • • • • • • • • • •		OFFICE USE ONLY:	• • • • • • • • • • • • • • • • • • • •
//_ Date of Transfer F	Request Transfer Reque		New application signed Transfer request approved Entered in FMP Course headsign appealled. SAB
Date of New App	\$lication \$ Amount of Tra	ansfer Fee	Course booking cancelled - SAP New course booked - SAP BB deleted/added if applicable
Method of Paymo	ent Receipt Numbe	er	Move original folder to inactive files Double check FMP for accuracy

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