



# THE UNIVERSITY OF THE WEST INDIES OPEN CAMPUS

## APPLICATION FOR TRANSFER

*The Application for Transfer form is to be completed by Open Campus students wishing to transfer to another UWI campus or by TLI franchise students wishing to transfer to the Open Campus. Please complete, scan and email the form to the Assistant Registrar, Admissions & Registration, Open Campus at [admissions@open.uwi.edu](mailto:admissions@open.uwi.edu) by the deadlines indicated below.*

**Transfers to:**

**Law and Medical Sciences: JANUARY 31**

**Other Faculties: MARCH 31**

### SECTION A - TRANSFER REQUEST

<b>1. Campus/TLI</b>	
From _____	To _____
<b>2. Faculty/Programme for transfer</b>	<b>3. Degree Option/Major for transfer</b>

### SECTION B - BIOGRAPHIC DATA

<b>4. UWI Student ID Number</b>			
<b>5. Name</b>			
Title	Last Name/Surname	First Name	Middle Name(s)
<b>6. Permanent Address:</b> Apt/Street/PO Box		<b>7. Mailing Address</b> (if different from Permanent): Apt/Street/PO Box	
City/Town/Post Office		City/Town/Post Office	
Parish/County		Parish/County	
State	Zip/Postal Code	State	Zip/Postal Code
Country		Country	
<b>4. Home/Permanent Phone</b> (      )		<b>8. Mailing Address Phone</b> (      )	
<b>5. Cell Phone</b> (      )		<b>9. Work Phone</b> (      )      Ext: _____	
<b>6. Email Address</b>		<b>10. Fax Number</b> (      )	
<b>11. Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female		<b>12. Date of Birth</b> yyyy/mm/dd _____/_____/_____	
<b>13. Nationality</b>		<b>14. Father's Nationality</b>	
<b>15. Marital Status</b> <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Legally Separated <input type="checkbox"/> Common Law <input type="checkbox"/> Widowed			

