Senior Citizen Audit Application

Student Full Legal Name _____

Have you attended USF before? ☐ Yes ☐ No   Former name during attendance, if different: _____

Social Security Number ____ ____ ____   ____ ____   ____ ____ ____ ____

The University of South Florida protects the social security numbers of all individuals which are in its possession. As required by Florida law (119.071 (5)), USF provides written notice to persons of the potential uses for the number at it.usf.edu/standards/ssn. Please do not return this form via email.

Term/Year of Registration: Fall _____   Spring _____   Summer _____

Gender _____   Date of Birth _____

Street Address _____

Email _____   Telephone _____

Emergency Contact _____   Emergency Contact Phone _____

Are you a citizen of the United States? ☐ Yes ☐ No   Are you a U.S. permanent resident? ☐ Yes ☐ No

If no, what is your nation of Citizenship _____

Visa Type, if applicable (check one): ☐ F-1 ☐ F-2 ☐ J1 ☐ J2   Other _____

Ethnicity (check one): Hispanic or Latino ☐ Yes ☐ No

Race (check all that apply): ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American

☐ Native Hawaiian or Pacific Islander ☐ White

Home Campus: ☐ Tampa ☐ St. Petersburg ☐ Sarasota-Manatee

Military Affiliation

Are you currently serving in the U.S. Armed Forces (including the National Guard or Active/Inactive Reserves)? ☐ Yes ☐ No

Have you ever served in the U.S. Armed Forces (including the National Guard or Active/Inactive Reserves)? ☐ Yes ☐ No

Are you a spouse or child of a person currently serving in, or who has ever served in, the U.S. Armed Forces (including the National Guard or Active/Inactive Reserves)? ☐ Yes ☐ No

Conduct Information

Are you currently or have you ever been charged with or subject to disciplinary action for scholastic integrity violations (such as plagiarism or cheating) or any other type of behavioral misconduct (such as violations of a student conduct code) at any educational institution?

Note: "Yes" is not required for poor academic performance unrelated to academic integrity violations or behavioral misconduct.

☐ Yes ☐ No

Have you ever been charged with a misdemeanor and/or felony?

Note: You must respond "Yes" for criminal records that (1) have not received a final expungement order; (2) have been sealed or are in the process of being sealed; (3) misdemeanor or filing actions that are pending.

"Yes" is not required for (1) traffic violations that resulted in a fine only; (2) violations below the misdemeanor/felony level; or (3) charges or convictions that have been expunged by final order.

☐ Yes ☐ No

Senior Citizen Audit Application

You must read and acknowledge the following section in order to complete your application.

I understand that this application is for Non-Degree admission to the University of South Florida (USF) and is valid only for the term indicated. I understand that the role of an auditor is as a listener, and it is up to the discretion of the course instructor to determine the level of interaction the auditor may have in the course. I acknowledge that course instructors are not required to provide grades and/or feedback on coursework, and that I will not receive a grade for any course(s) I audit. I also understand and agree that I will be bound by USF's regulations concerning application deadline dates and admission requirements.

I certify that the information given in this application is complete and accurate, and I understand that to make false or fraudulent statements within this application or residence statement may result in disciplinary action, denial or admission and invalidation of credits earned. If admitted, I hereby agree to abide by the policies of the Florida Board of Governors and the rules and regulations of the University of South Florida. Should any of the information I have given change prior to my enrollment at the institution, I shall immediately notify the Office of the Registrar.

Applicant Signature _____ Date _____

OFFICE USE ONLY	New	FSR	Continuing	Residency
	Initials _____		Date _____	

Senior Citizen Auditor
Residency Affidavit

A Florida senior "resident for tuition purposes" is a person 60 years or older who can provide **two** (2) documents proving residency in this state which are **both dated/issued at least 12 months prior to the first day of classes** for the semester for which admission is sought. If there is evidence of legal ties to another state, Florida residency may not be claimed. **Submit at least one form of proof from the list of Primary documents below:**

Primary:

☐ Florida driver's license _____ Original Issue Date _____

☐ Florida vehicle registration (VIN) _____ Original Issue Date _____

☐ Florida voter's registration _____ Original Issue Date _____

☐ Proof of homestead exemption or warranty deed

☐ Proof of permanent full-time employment in Florida via a letter on company letterhead stating that the claimant has been employed at least 30 hours per week for at least 12 months

Secondary:

☐ Florida incorporation or professional/occupational license

☐ Florida-based charitable or professional organization membership proof

☐ Proof of 12 consecutive months of payment on a water, electric or natural gas bill or a lease agreement and proof of 12 consecutive months of payment

☐ A Declaration of Domicile

I, _____, being first duly sworn, do hereby swear or affirm that I have been or will be a Florida resident and domiciliary for the preceding 12 months. Florida is my true, fixed and permanent home and place of habitation. Florida is the state where I live and to which I intend to remain. As evidence of my intention to have made Florida my permanent home, I hereby supply certain documents which show that I began establishing my domicile at least 12 months ago. *I understand that a false statement in this affidavit will subject me to penalties for making a false statement pursuant to 837.06, Florida Statute.*

Signature _____ Date _____

Senior Citizen Auditor
Frequently Asked Questions

How Do I:

Submit my registration packet?

All forms must be received by 5 p.m. on the fifth day of the term. Forms can be submitted to:

Campus	Office of the Registrar Location
Tampa	Student Services (SVC 1034)
St. Petersburg	Bayboro Hall (BAY 102)
Sarasota-Manatee	Sarasota-Manatee Campus (SMC C107)

Register for my courses?

The Office of the Registrar will process registration forms by 5 p.m. on the sixth business day of the term. Registration forms submitted prior to the sixth day of the term will be held until the registration date. Once processed, your courses will be viewable in OASIS.

Obtain a USF Identification Card?

The cost for your original card is $10; any replacement cards are $15 each. For more information, please see the USFCard Center website: https://www.usf.edu/it/class-prep/usf-card.aspx.

Purchase a parking pass?

Parking permits are required to park at all USF campuses. For more information please see the Parking and Transportation services websites for your prospective campus:

Tampa: https://www.usf.edu/administrative-services/parking/
St. Petersburg: https://www.usfsp.edu/administrative-and-financial-services/parking-transportation/
Sarasota-Manatee: https://www.sarasotamanatee.usf.edu/campus-life/campus-resources/parking-services

Set up my USF NetID and email account?

This information is included in your welcome letter. If you need further instruction, please refer to the USF IT Activating & Selecting documentation website: https://www.usf.edu/it/documentation/activation.aspx

Get my other questions answered?

If you have further questions, do not hesitate to contact us.

Tampa: 813-974-2000; asktheregistrar@usf.edu
St. Petersburg: 727-873-4645; asktheregistrar@usf.edu
Sarasota-Manatee: 941-359-4330; asktheregistrar@usf.edu

Senior Citizen Audit
Registration Worksheet

UNIVERSITY of
SOUTH FLORIDA
Student Success
Office of the Registrar

Student Directions: In addition to submitting this form, you will need to submit the Senior Citizen Audit Application only if you have not enrolled at USF in the past three (3) semesters. You will need the course and instructor information to complete this form. This can be found in the Schedule Search and University Directory. If the instructor is listed as "Staff" or "TBA" please contact the department. Completing this worksheet does not guarantee registration in the courses below. Students will not be registered in closed/full courses. **It is the student's responsibility to attain the appropriate approvals of the course(s) indicated below. Instructor approval is** *mandatory* **for all course audits.**

Student Name _____ **USFID Number** _____

Home Campus _____ **Term and Year** _____

By signing below, you are agreeing to abide by University policy to audit this/these course(s).

Student Signature _____ **Date** _____

Policy for Instructors: By signing below, you are agreeing to abide by University policy (Policy 10-006) allowing the student listed above to audit the course(s) listed below.

Priority courses listed below.

Campus	CRN	Subject	Number	Section	Title	Instructor's signature/approval
Campus	CRN	Subject	Number	Section	Title	Instructor's signature/approval
Campus	CRN	Subject	Number	Section	Title	Instructor's signature/approval
Campus	CRN	Subject	Number	Section	Title	Instructor's signature/approval

Alternative courses can be listed below in order of preference.

Campus	CRN	Subject	Number	Section	Title	Instructor's signature/approval
Campus	CRN	Subject	Number	Section	Title	Instructor's signature/approval
Campus	CRN	Subject	Number	Section	Title	Instructor's signature/approval
Campus	CRN	Subject	Number	Section	Title	Instructor's signature/approval