

**Request for Relocation from Pitt Johnstown
You may ONLY submit this form the semester BEFORE you are requesting the relocation.**

**Please print legibly and answer all questions!**

Student Name (Last, First): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student ID Number: \_\_\_\_\_\_\_\_\_\_\_\_\_ Student E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Term in which you wish to relocate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Example: Fall 2024)

Campus You Wish to Relocate to: **Bradford Greensburg Titusville Oakland\*\***
***\*\*If your request is for the Oakland campus, which school are you requesting relocation to (choose 1 only, you cannot submit to multiple schools):***Dietrich School of Arts & Sciences: \_\_\_\_ College of Business Administration: \_\_\_\_
School of Computing & Information: \_\_\_\_ Swanson School of Engineering: \_\_\_\_
School of Health & Rehabilitation Sciences: \_\_\_\_ School of Nursing: \_\_\_\_
School of Public Health: \_\_\_\_ School of Social Work: \_\_\_\_

What is Your Current UPJ Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ New Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Number of completed UPJ Credits: \_\_\_\_\_\_\_
Number of credits you are completing this semester: \_\_\_\_\_\_\_
Number of Transfer Credits brought into UPJ: \_\_\_\_\_\_
What is Your Current GPA: \_\_\_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_

Reason For Relocation Request (**THIS SECTION IS REQUIRED**): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By signing and submitting this form to the Pitt Johnstown Registrar’s Office, you understand that:

1. Your request and academic records will be sent IF you meet the requirements set by the campus you are requesting relocation to.
2. Acceptance or denial is determined by the campus you want to attend, NOT by UPJ. UPJ is unable to provide any advising assistance in this relocation.
3. If you change your mind, you will notify the Registrar’s Office and the campus which accepted you.
4. If you have any questions, please contact Billie Kochara, Academic Services Coordinator at: 814-269-1907 or bjk122@pitt.edu

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

Registrar’s Office Representative Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Office USE ONLY:**

Admit: \_\_\_\_\_\_\_\_ Deny: \_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Receiving Campus Official: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_