



## Senior Citizen Registration Guide



**Office of Records and Registration  
140 Seventh Avenue South BAY102  
St. Petersburg, FL 33701**

**Phone: (727) 873-4645 Fax: (727) 873-4329**

[www.usfsp.edu/records/tuition-waivers-for-florida-seniors/](http://www.usfsp.edu/records/tuition-waivers-for-florida-seniors/)

# General Information for Senior Citizen Registration

USF St. Petersburg welcomes Florida residents who are 60 years or older to discover course enrollment opportunities and lifelong learning. This program allows you to register for up to three undergraduate level courses offered by the College of Arts and Sciences, tuition-free, on a space available basis. For additional information on this program, please click the link below:

<http://www.usfsp.edu/records/tuition-waivers-for-florida-seniors/>

## Registration Instructions:

- Download the applicable form by clicking one of the following link: [Senior Citizen Registration Guide](#)
- Please complete and mail or fax the completed forms to the Office of Records and Registration by the 5<sup>th</sup> day of the semester (refer to the Academic Calendar for important dates). Mailing address is: 140 Seventh Ave. S. BAY 102, St. Petersburg, FL 33701. Fax number is (727)873-4329.
- The Office of Records and Registration will process registration forms on the 6<sup>th</sup> day of the semester. Students do not need to be present as forms are processed automatically.
- Registration forms submitted prior to the 6<sup>th</sup> day of the semester will be held until the registration date.
- No registrations will be processed after the 6<sup>th</sup> day of the term.
- The student may also verify enrollment on MyUSF NetID  
<http://www.usfsp.edu/portals/students.htm>

## Registration Process:

- Space Available Registration – Senior Citizen Audit registration is on a “space available” basis. Many high demand courses are already filled by degree-seeking students prior to the Senior Audit Registration date therefore, students may not pre-register for courses for which they plan to use the Senior Citizen Tuition Waiver. The waiver will not be processed if a Senior Citizen pre-registers and then submits a Senior Citizen tuition waiver form for those courses. Available courses can be viewed online by clicking on ‘Schedule of Classes’.
- Course Approval/Permission – Many courses require departmental approval, prerequisites or have other restrictions which limit registration. If you are aware of those restrictions, you may request the necessary permits from the respective instructor in advance of registration. There is a Registration Worksheet form to accomplish this. Under no circumstance will notes on plain paper without department letterhead be accepted. Some courses are not available for auditing under any circumstances.
- Waiver – It is the student’s responsibility to complete and submit the waiver form allowing sufficient time for the form to reach the Office of Records and Registration by the registration deadline. Additional expenses, such as books and miscellaneous supplies may be required for class participation and are the responsibility of the senior auditor.

## Parking Information:

- Parking permits are required to park at USF St Petersburg, 24 hours a day, seven days a week. Permit types are used to designate parking locations on campus. Each permit type is restricted to the parking spaces on campus that matches the permit category from 7:00am to 5:30pm Monday through Friday. After 5:30pm, weekends, and holidays students with valid permits may park in Visitor and Gold spaces.
- Parking Permits may be purchased from Parking Services located in Bayboro Hall (BAY 132). Additional information may be obtained by visiting the Parking Services web site:  
<http://www.usfsp.edu/financial/parking-transportation/>

**SENIOR CITIZEN RESIDENCY AFFIDAVIT –  
REQUIRED of New Students & Students Returning After 1 Year**

If you believe you qualify as a Florida resident for tuition purposes, complete this form. Additional documentation other than what is described may be required by the University. A Florida "resident for tuition purposes" is a person who has established and maintained legal residence in Florida for at least 12 months prior to the first official day of the semester for which you are applying. Other persons not meeting the 12 month legal residence requirement may be classified as Florida residents for tuition purposes only if they fall within one of the special categories authorized by the Florida Legislature and the Board of Trustees. All other persons are ineligible for classification as a Florida "resident for tuition purposes".

**IT IS IMPORTANT TO KNOW:**

- To qualify as a Florida resident for tuition purposes you must be a U.S. citizen, permanent resident alien, or a legal alien granted indefinite stay by the INS.
- Documents supporting the establishment of legal residence must be dated, issued, or filed 12 months before the first day of classes. All documentation is subject to verification, and a minimum of two forms of documentation are required.
- Living in or attending school in Florida will not in of itself establish legal residence.
- Students who depend on out-of-state parents for support are presumed to be legal residents of the same state as their parents.
- Residence in Florida must be for the purpose of establishing a permanent home and not merely incident to enrollment at an institution of higher education.

**NON-FLORIDA RESIDENTS**

I understand that I do not qualify as a Florida resident for tuition purposes for the term for which this application is submitted and that if I should qualify for some future term it will be necessary for me to file the required documentation prior to the beginning of the term in order to be considered for Florida Residency.

Signature in Ink: \_\_\_\_\_ Date: \_\_\_\_\_

**FLORIDA RESIDENTS**

**Any person claiming residency must complete this section in full. *Please print.***

1. Name of Student: \_\_\_\_\_
2. Student ID #: \_\_\_\_\_
3. Name of Claimant: \_\_\_\_\_
4. Claimant Relationship to Student: \_\_\_\_\_
5. Permanent Legal Address of Claimant: \_\_\_\_\_
6. Telephone Number: (\_\_\_\_) \_\_\_\_\_
7. Date began establishing Legal Florida Residence and Domicile: \_\_\_\_\_
8. Voter's Registration (State/#): \_\_\_\_\_
- 8a. Voter Registration Issue Date: \_\_\_\_\_
9. Driver's License (State/#): \_\_\_\_\_
- 9a. Drivers License Issue Date: \_\_\_\_\_
10. Vehicle Registration (State/#): \_\_\_\_\_
- 10a. Vehicle Registration Issue Date: \_\_\_\_\_
11. Non-U.S. Citizen Only (Resident Alien Number and Issue Date): \_\_\_\_\_

I do hereby swear or affirm that the above named student meets all requirements indicated in the checked category above for classification as a Florida resident for tuition purposes. I understand that a false statement in this affidavit will subject me to penalties for making a false statement pursuant to 837.06, Florida Statutes, and that a false statement in this affidavit may subject the above named student to the penalties for making a false statement pursuant to BOR Rule 6C-6.01(6), F.A.C.

Signature of Student or Claimant \_\_\_\_\_  
Date \_\_\_\_\_

**SECTION I - MEDICAL HISTORY FORM 2011-2012**

<http://www.shs.usf.edu/>

<hr/> <b>LAST/FAMILY NAME</b>	<hr/> <b>FIRST/GIVEN NAME</b>	<hr/> <b>MI</b>	<hr/> <b>U#</b>
<hr/> <b>STREET ADDRESS</b>		<hr/> <b>PHONE NUMBER</b>	
<hr/> <b>CITY, STATE, ZIP, COUNTRY</b>		<hr/> <b>EMAIL ADDRESS</b>	
<hr/> <b>DATE OF BIRTH (MM/DD/YYYY)</b> ____ / ____ / ____		<b>GENDER</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>ENTERING SEMESTER</b> <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year _____		<input type="checkbox"/> Indeterminate	
<b>COUNTRY OF ORIGIN</b> <input type="checkbox"/> USA		<input type="checkbox"/> Other country, specify: ____	

**SIGNATURE REQUIRED**

Per Florida Rule 6C-6.001, my signature below signifies that the medical history information provided is true and complete to the best of my knowledge. I further acknowledge receipt and understanding of the immunization information provided by USF SHS. <http://www.shs.usf.edu/>

Signature \_\_\_\_\_ Date \_\_\_\_\_

USF SHS provides detailed information concerning risks associated with meningitis and hepatitis B and the availability, effectiveness and known contraindications of these required vaccines. Please [click here](#) for printable CDC vaccine information statements. **DISCLAIMER/NOTICE:** Information collected on this form is for registration purposes only and does not create a medical record and is not reviewed by medical personnel. Should you become a SHS patient, this document may be retrieved to expedite initial medical appointment and may then become part of your medical record.

**SECTION II - IMMUNIZATION HISTORY**

**A, B, and C must be completed (or supporting documentation must be emailed or faxed along with this document). This is a requirement for registration.**

**A. Measles/Mumps/Rubella (Select ONE of the following):**

<input type="checkbox"/> <b>MMR (Measles/Mumps/Rubella) Dates of 2 doses</b>  MMR #1 _____ MMR #2 _____	<input type="checkbox"/> <b>Measles (Rubeola)-Dates of 2 doses OR attach a copy of lab titer (IgG)</b> Measles #1 _____ OR Attach a copy of Lab Titer Measles #2 _____ <input type="checkbox"/> <b>Rubella (German Measles)-Date of dose OR attach a copy of lab titer (IgG)</b> Rubella #1 _____ OR Attach a copy of Lab Titer	<input type="checkbox"/> I was born <b>before</b> 12/31/1956 therefore this vaccination requirement does not apply to me.
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**B. Meningitis Vaccine at age 16 or later (Select ONE of the following):**

Date of vaccination: \_\_\_\_\_

I will not be living on campus and decline receipt of the Meningitis vaccine.

**RESIDENTIAL STUDENTS NOTE:** This is a requirement for all students who will live on the USF campus. No student will be assigned a USF residence hall room until proof of meningitis vaccination is received by USF Student Health Services. <http://www.housing.usf.edu/index.html>

**C. Hepatitis B Vaccine (Select ONE of the following):**

Dates of vaccination: Hep B #1 \_\_\_\_\_ Hep B #2 \_\_\_\_\_ Hep B #3 \_\_\_\_\_

I decline receipt of the Hepatitis B vaccine.

**D. An official stamp** from a doctor's office, clinic, or Health Department **AND** an authorized signature must appear on this form or on the official document(s) attached in order to be accepted:

\_\_\_\_\_  
Name and address of clinic OR Physician (Facility) Stamp

\_\_\_\_\_  
Authorized Signature & Date

**Mail your completed form and any copies of records or lab reports, if applicable, to the campus where you will be attending class.**

USF St. Petersburg  
 Records and Registration  
 140 Seventh Avenue South, BAY102  
 St. Petersburg, FL 33701  
 Phone: (727)873-4645  
 Fax: (727)873-4FAX  
 morin@usfsp.edu

Student ID or SSN								Birth Date				Semester				Gender
								Month /	Day /	Year					YYYY MM	M/F

**Name:** \_\_\_\_\_  
*Last*
*First*
*Middle/Maiden*

**Address:** \_\_\_\_\_  
*Street & Number City*
*State*
*Zip County*
*Telephone (include Area Code)*

**E-mail Address:** \_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_  
*Last*
*First*
*Middle/Maiden*

Address: \_\_\_\_\_

1. **Are you a citizen of the United States?** Yes \_\_\_ No \_\_\_  
 Are you a U.S. permanent resident (Green Card Holder)? Yes \_\_\_ No \_\_\_  
 What is your nation of Citizenship: \_\_\_\_\_  
 Visa Type (check one)  F-1  F-2  J1  J2 Other \_\_\_\_\_
2. **Ethnicity** ( Please check One): Hispanic or Latino Yes \_\_\_ No \_\_\_
3. **Race** (please check all that apply): \_\_\_ American Indian or Alaskan Native Asian \_\_\_ Black or African American  
 \_\_\_ Native Hawaiian or Other Pacific Islander \_\_\_ White
4. **Home Campus:** \_\_\_ Tampa \_\_\_ St. Petersburg \_\_\_ Sarasota \_\_\_ Lakeland
5. **Have you ever been charged with or subject to disciplinary action for scholastic or any other type of conduct at any educational institution?** Yes \_\_\_ No \_\_\_
6. **Have you ever been arrested or charged with a violation of law which resulted in probation, community service, a jail sentence, revocation of your driver's license or in a fine of \$200.00 or more?**  
 Yes \_\_\_ No \_\_\_

*If your answer to either of the foregoing is "yes," you must submit a full statement of relevant facts on a separate sheet attached to this form, and you are required to furnish the university with copies of all official documents explaining the final disposition of the proceedings. If your records have been expunged pursuant to applicable law, you are not required to answer yes to this question. The University will undertake to expeditiously review your request for enrollment; however, your registration is conditional until the review is complete.*

**I certify that the above information is correct and complete and understand that falsifying or withholding information may result in disciplinary action and withdrawal from the University. I agree to abide by the policies of the Florida Board of Education and the rules and regulations of this University.**

*Applicant's Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

**Office Use ONLY**

New \_\_\_\_\_ FSR \_\_\_\_\_ Continuing \_\_\_\_\_ Residency Determination \_\_\_\_\_

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Processor \_\_\_\_\_ Date \_\_\_\_\_ Comments \_\_\_\_\_



Registrar's Office, BAY102  
 140 Seventh Ave South, BAY102  
 St. Petersburg, FL 33701

## Senior Citizen Audit Registration Worksheet

This worksheet must be submitted in addition to the Senior Citizen Tuition Waiver Registration Form. Completing this worksheet does not guarantee registration in the courses requested. Instructor approval may be required and not all courses are available for audit status. It is the student's responsibility to obtain any required approvals. Additional expenses, such as books and miscellaneous supplies may be required for class participation and are the responsibility of the senior auditor.

This worksheet is valid only for the term indicated.

Term/Year of Registration: Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ (Year)  
(Year)

Students Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

List Preferred Courses Below

CRN	Prefix	Number	Section	Permit	Closed Section	Dept. Restriction	Approval Stamp

List Alternate Course(s) Below

CRN	Prefix	Number	Section	Permit	Closed Section	Dept. Restriction	Approval Stamp

Special Note: Sr Citizen Audit Registration Worksheet/Packet may be turned in to the Office of Records and Registration (Bayboro Hall 102) up to 2 weeks prior to Sr Citizen Registration one-day only event.

## How to Find the Online USF Schedule of Classes

Type the following address in your Internet browser window –

<http://www.registrar.usf.edu/ssearch/search.php>

- 1) Open the "**TERM**" pull-down menu – Click on the desired term (e.g. Spring 2012)
- 2) Open the "**CAMPUS**" pull-down menu – Click the desired campus (e.g. St. Petersburg)
- 3) For Web (online)/Telecourses/Distance Learning courses, open the "Distance Learning" pull-down menu – click the desired delivery method (e.g. Distance Learning). **DO NOT ENTER A CAMPUS FROM THE CAMPUS PULL-DOWN MENU.**
- 4) Either:
  - a) Use the "**College**" window to search for all courses offered on the selected campus by choosing a specific college (e.g. Arts & Science – St. Petersburg) OR
  - b) Use the "**Department**" window to search courses by choosing a specific department (e.g. History)
- 5) Use "**Level**" to sort for undergraduate or graduate courses.
- 6) Use "**Status**" to narrow your search further by displaying only open courses, only closed courses or all courses.
- 7) Note that other search options are available (but not mandatory), such as search for courses that meet on specific days of the week or that start at specific times.
- 8) Click on "**Search**", located at the bottom of the screen, to display the results of the desired search.

## Terms You Need to Know

### Course Descriptors

CRN: A 5-*digit* 'Course Reference Number' unique to each course offered by USF.

SUBJ or SECTION: A 3-*letter* Subject designation (e.g. HIS for History)

CRS# or Number: A 4-*digit number* designates level of course  
(e.g. HIS 2000 for Introduction level to History)

SEC: A 3-*digit number* used to distinguish between multiple classes of the same course.

PMT: Permit (permission) required from the Department offering the course in order for student to register for this class if "Yes" is in the PMT column.

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