



Request for Admission Accommodations on the Basis of Religious Discrimination

ELIGIBILITY:

On January 9, 2024, the Florida Board of Governors issued BOG Order No. 2024-EO-01 under the authority of the Governor’s Executive Order 23-242. This order recognizes the danger to students who are seeking to transfer to a Florida State University System (SUS) to escape a reasonable, well-founded fear of antisemitic or other religious discrimination, harassment, intimidation, or violence at an out-of-state, degree-granting, accredited institution within the United States. As such, UCF and other SUS institutions in Florida may remove certain barriers or waive requirements for undergraduate students seeking to transfer.

If you are seeking admission to UCF under this Executive Order, you must be a current applicant for admission to UCF. If you have not applied for admission, you must do so on our website prior to submitting this form.

Please complete the following information and submit this form to Debra Reynolds, Director for Operations and Data Management, at debra.reynolds@ucf.edu.

This form is for use by applicants seeking admission to an undergraduate degree program at the University of Central Florida.

Date:

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Date Month Year

UCF ID:

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Last Name: _____ First Name: _____

College/University Currently Attending: _____

Desired Term of Entry at UCF: _____

Please upload one of the following to establish the claim of a well-founded fear of religious persecution as described in the Executive Order above:

1. A personal statement from you.
2. A statement from a witness.
3. A recording or photograph.
4. Official record(s) of a complaint(s) filed with your college, university or law enforcement.
5. Any other relevant information or material germane to your claim.

I affirm that all evidentiary documentation provided to support my claim of religion-based harassment or persecution is true and correct and I take full responsibility for its accuracy. False claims may be subject to review by the Office of Student Rights and Responsibilities.

Student Signature: _____ Date: _____