



## Transient Permission Form

### Section I: To be completed by Student

Student Name \_\_\_\_\_ Student ID Number \_\_\_\_\_

Mailing Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

**I request permission to take the following courses as a transient student at:**

Transient Institution: \_\_\_\_\_

Transient Term:  Summer 20\_\_\_\_  Fall 20\_\_\_\_  Spring 20\_\_\_\_

Transient Courses(s)

SGSC Equivalent(s)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The justification for this request is as follows:

\_\_\_\_\_

I also plan to take the following courses at SGSC during the same semester:

\_\_\_\_\_

### STUDENT'S STATEMENT

My signature below indicates that I understand that I must have a transcript showing credit for the course(s) listed above sent to SGSC. I further understand that I must make a minimum of a "C" grade in each course in order to receive credit for that course at South Georgia State College. I am responsible for seeing that the above course(s) is applicable to my SGSC program. I must also apply for admission to the institution where I will be taking transient course(s).

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

### Section II: Approvals

(It is the responsibility of the student to receive prior approvals upon submission to the Registrar's Office.)

Faculty Advisor \_\_\_\_\_ Date \_\_\_\_\_

Dean \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*

### REGISTRAR'S OFFICE

The student named above is in good standing and eligible to return SGSC. The student has permission from South Georgia State College to be a transient for the term/year listed above and take the approved course(s) listed. If the student's academic standing changes, the student will not be eligible to be transient at your institution.

Registrar Representative \_\_\_\_\_ Date \_\_\_\_\_