

# TRANSIENT REQUEST FORM



**THIS FORM IS FOR INTERNAL USE ONLY. THIS FORM IS NOT A TRANSIENT LETTER**

Complete and return this form to the Registrar's Office for processing. If approved, your transient letter will be generated by the Registrar's Office and forwarded to the college you wish to attend. You will be sent a copy of the letter to your Brenau email. Please allow two weeks for processing. **Transient permission will not be granted if there are outstanding financial obligations to Brenau University.** **\*\*PLEASE NOTE:** The college for which this transient permission form is requested may require a formal application for admission. It is the student's responsibility to comply with that college's standards and application deadlines. Please also note that a transcript must be submitted to Brenau University Registrar's Office at the end of the transient session.

**Student Information - Please print clearly:**

SSN/Id No: \_\_\_\_\_

Note: If you include a SSN, you must encrypt this form via Virtru if you email.

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

Brenau email: \_\_\_\_\_

Your Advisor: \_\_\_\_\_

**Transient Institution Information:**

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

Campus Location \_\_\_\_\_

Please choose processing option:  Email  Fax

Email or Fax Number of Institution: \_\_\_\_\_

**TO BE COMPLETED BY ADVISOR AND DEPARTMENT:**

The advisor recommends the student attend the above institution and transfer the following course(s) to Brenau University:

Permission is requested for semester: Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ / Year: \_\_\_\_\_

TRANSIENT COURSE(S)			
Subject	Course#	Course Title	Hours

BRENAU EQUIVALENT(S)			
Subject	Course#	Course Title	Hours

It is the student's responsibility to register for courses that are applicable toward his/her degree. All courses must be successfully completed as outlined in the Brenau University Catalog. It is also the student's responsibility to have official transcripts sent to the Registrar's Office so that all applicable credit can be posted to the student's record. (Students may not transfer more than 65 hours from a 2 year institution).

Student status: Graduate\* \_\_\_\_\_ Undergraduate \_\_\_\_\_ Women's College \_\_\_\_\_

**\*Please note that department approval is required of all graduate students. See catalog for residency requirements.**

Yes _____ No _____	Is the course available at Brenau?	Yes _____ No _____	Is the student in the last 30 hours overall?
Yes _____ No _____	Has the student fulfilled the 30-hour residency requirement?	Yes _____ No _____	Has the student applied for graduation?
Yes _____ No _____	Is the student in the last 21 major hours?	Yes _____ No _____	Does the student have an associate degree?

Transient Reason: \_\_\_\_\_

Advisor's Approval: \_\_\_\_\_ Date: \_\_\_\_\_ Dept. Chair Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**REGISTRAR'S OFFICE USE ONLY:**

Current Term:	Current Hours:	Cum. GPA:	Probation: Yes _____ No _____
Restrictions:	Applied for graduation:	Student Notified:	

COMMENTS: \_\_\_\_\_

Registrar Approval: \_\_\_\_\_ Date: \_\_\_\_\_

*(Additional approval that may be required)*

Vice President for Academic Affairs: \_\_\_\_\_ Date: \_\_\_\_\_