TRANSIENT STUDENT PERMISSION REQUEST FORM

MAIL, FAX OR DROP OFF AT: Registrar's Office, 3175 Cedartown Hwy., SE, Rome, GA 30161. Fax Number: (706) 295-6341

NAME:____________________________________________

GHCID#_________________________________________

E-MAIL:_________________________________________

DAYTIME PHONE:______________________

HOME PHONE:_________________________

TERM YOU WISH TO BE A TRANSIENT:_________________________________________________

COLLEGE TO WHICH YOU WISH TO BE A TRANSIENT:_____________________________________

LETTER SHOULD BE: ______ MAILED ______ FAXED

COMPLETE ADDRESS/FAX # OF RECEPIENT:

_______________________________________________________________

_______________________________________________________________

IMPORTANT!
REQUEST THAT YOUR TRANSCRIPT BE MAILED TO GEORGIA HIGHLANDS COLLEGE.
READ INSTRUCTIONS BELOW CAREFULLY

SIGNATURE: ___________________________ DATE: __________________

Students MUST meet the following conditions to be a transient student:

1. Completed at one semester at Georgia Highlands College
2. Be in good academic standing
3. Exited all Learning Support requirements
4. Attended Georgia Highlands College within the past 3 semesters

Students who are not in good academic standing and wish to attend another institution may complete this form to acquire a letter of NO OBJECTION.

A formal application must be submitted to the college for which this transient permission is requested. It is the student's responsibility to comply with that college's standards and application deadlines and processes.

IT IS THE STUDENT'S RESPONSIBILITY TO REGISTER FOR COURSES WHICH ARE APPLICABLE TO HIS/HER DEGREE PROGRAM.