



**APPROVAL FOR REINHARDT COLLEGE STUDENT TO REGISTER AS A
TRANSIENT STUDENT AT ANOTHER INSTITUTION**

*The purpose of this form is to request permission to study as a transient student at another institution. If approved, a permission letter will be sent to the host institution. The student must apply to and be accepted by the host institution. Approval of this form in no way guarantees acceptance at the other school. The student must have an official transcript of transient work forwarded to the Records, Registration and Advisement Office at Reinhardt College when grades are received. **Course descriptions from the other institution must be included with this application.***

Name _____ Social Security Number _____ - _____ - _____

Home Address _____

City, State, Zip _____

Major _____

Name of Other Institution _____

Address of Other Institution _____

City, State, Zip _____

Term and Year you will attend _____ Full-time _____ OR Part-time _____

PROPOSED COURSES:

OTHER INSTITUTION

REINHARDT EQUIVALENT

Dept Prefix & Course No.	Course Title	Hours	Dept Prefix & Course No.	Course Title	Hours
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

I understand that my signature indicates that Reinhardt College has my permission to release information regarding my academic standing and social security number to the college listed above.

Approved:

Dir. of Records, Registration and Advisement Date Student Signature Date

Dean (Major) Date

**MUST BE RETURNED TO THE RECORDS, REGISTRATION AND ADVISEMENT OFFICE FOR
PROCESSING**

FOR OFFICE USE ONLY:

Date Request received ____ / ____ / _____ Date Letter Mailed to Institution ____ / ____ / _____