



Transient Student Request

This form is to be used by Shorter University (SU) students who would like to apply to take course work at another institution without breaking their affiliation with SU or establishing permanent admission to a host institution. Please allow for three weeks for transient requests to be evaluated.

Transient status **may** be an option if **all** of the following criteria are met at SU while following all transfer credit policies.

- The student is in good academic and financial standing
- Course or courses listed below have not been previously taken
- Course or courses listed below are not offered for the year and term
- Home address on record is located outside of a 50 mile radius of the campus to which the student is assigned

Please consult with your advisor about your transient course selection and review the following guidelines before submitting your transient request to the SU Registrar's office:

- Courses in which the student earned a grade of "C" or above may be accepted for transfer credit.
- Accepted transfer credit quality points will not be used for calculating the cumulative academic GPA.
- Notification of transient request outcome will be sent to the student's SU email. If approved, a copy of the transient permission letter will also be sent to the host institution. If request is denied or never submitted then credit will not be awarded.
- Upon completion of the course a student must request an official transcript from the host institution to be sent to the SU Registrar's Office. Any student who does not provide a transcript for transient work will have a hold placed on his or her account prohibiting registration until the transcript is received. If student decided not to enroll they must request a letter of non-attendance be sent from the host institution to SU.

Student Name: _____ Student ID: _____
First Last

Academic year & term for transient study: Year: 20 ____ Term: Summer ____ Fall ____ Spring ____

Are you a student-athlete at SU? Yes No

Host institution name: _____

Host institution address: _____
Street City State Zip

Signing below indicates that you understand all policies stated above and agree to adhere to them.

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

COMPLETED BY STUDENT				COMPLETED BY REGISTRAR	
Host Institution Full Course Code	Host Credit Hours	Host Course Title	SU Course Code (requested)	SU Course Code (as determined by Dean review)	Approval or Denial (completed by the Registrar's Office)