Receipt Date & Initials



Transient Approval Form

This form is to be used by a current TTC student who is in good academic standing and wants to take a course at another regionally accredited institution for transfer credit at TTC. This form should be completed by the student with the assistance of their academic advisor. Final approval must be received from their academic dean before submitting to the Registrar's Office.

Name		Student ID #				
	Last	First	MI			
Major		Email				
I request to take t	he following course(s) at					
		Name of A	Accredited College	/University		
		during the Term		of		
City and State of College/University			Term		Year	
This college/unive	ersity is on the (check one)	semester system	quarter sy	stem		
	Course Information from the	the Visiting College/University		Equivalent TTC Course Information		
Course ID		se Title	Credit	Course ID	Credit	
Ex. ENGL 101	Ex. Composition	on & Literature I	Hours	Ex. ENG 101	Hours	
Approved courses	taken at another institution mu	ist he completed with a gr	ade of C- or het	ter to receive trans	fer credit	
	6 of all required courses for your	•				
	14 business days of receipt of a			_		
	Student Signature			Date		
	Academic Advisor Signature			Date		
	Dean Signature			Date		
Registrar's Office			Date			

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