



OGLETHORPE

UNIVERSITY

Transient Student Application

Full Name: _____

Student ID: _____

Transient Institution Information

Name of Institution: _____

Term: _____

(Please fill in the term in which you will be enrolled as a transient student)

Transient Course Information

<u>Course Prefix & Number</u>	<u>Course Title</u>	<u>Credit Hours</u>	<u>Equivalent Course at Oglethorpe*</u>	<u>Equivalent Course Title*</u>	<u>Advisor Approval</u>	<u>Program Coordinator Approval**</u>
EX: MATH-2140	Elementary Statistics	3	MAT-111	Statistics	Advisor Signature	Program Coordinator Signature

*If Applicable

**Required if the Oglethorpe Equivalent Course is being used to satisfy a major/minor requirement.

Financial Aid Counselor Signature: _____

Please visit the Hub for this signature.

Important Information

- At the conclusion of the term, you must request an OFFICIAL COPY of your transcript from the transient institution to be sent to Enrollment Services. Until this transcript is received, you will not be able to register for future terms nor will you be able to obtain an Oglethorpe University transcript.
- **Only grades of C- or higher will be accepted for transient credit. Any grades below a C- will not be accepted for transient credit.**
- Credits will appear on the Oglethorpe University record, but grades will not be used in determining a student's Oglethorpe grade point average.
- Please read Section 5.8.6. of the Bulletin to read all of the policies and restrictions of transient credit. By signing this form below you will be held to the institutional policies of that section.

By signing below, I acknowledge that I have read and understand the information on this form.

Student Signature: _____ Date: ___ / ___ / _____

Received By: _____ Date: _____

Processed By: _____ Date: _____