



**TRANSIENT STUDENT REQUEST FORM**

**NAME:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**STUDENT ID (900#)** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**ADDRESS:**  
\_\_\_\_\_  
\_\_\_\_\_

**PROGRAM OF STUDY:** \_\_\_\_\_

**DEGREE**       **DIPLOMA**       **CERTIFICATE**

**LIST THE COLLEGE WHERE YOU WISH TO TAKE TRANSIENT CLASSES BELOW:**

\_\_\_\_\_

**LIST THE COURSE(S) YOU WISH TO TAKE AS A TRANSIENT STUDENT BELOW:**

Augusta Tech Course Number	=	Host College Course Number
1) _____	=	1) _____
2) _____	=	2) _____
3) _____	=	3) _____
4) _____	=	4) _____
5) _____	=	5) _____

**SIGNATURE:** \_\_\_\_\_

**PLEASE ALLOW 5 TO 7 WORKING DAYS FOR YOUR REQUEST TO BE PROCESSED.**

<b>FOR OFFICE USE ONLY</b>	
_____ <b>PROCESSED</b>	_____ <b>MAILED</b>