

Transient Permission Form

The student name below has permission to attend Columbus State University as a transient student during \_\_\_\_\_.  
Semester Year

Student's Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

The student's status at this institution is:

\_\_\_\_\_ in good standing.

\_\_\_\_\_ on academic probation, but is eligible to enroll.

\_\_\_\_\_ accepted for admission to this institution for  
\_\_\_\_\_ Semester Year

\_\_\_\_\_ Other. Please explain: \_\_\_\_\_  
\_\_\_\_\_

Regent's Testing Status & Guaranteed Tuition Plan (University System of Georgia institutions only):

\_\_\_\_\_

At the end of the semester, a transcript of the work completed at Columbus State University will be sent upon completion of a request from initiated and signed by the student. It is the student's responsibility to ascertain which courses will be accepted for credit at the parent institution.

SEAL

(Rev. 03/08)

\_\_\_\_\_  
Signature of Registrar

\_\_\_\_\_  
Institution

\_\_\_\_\_  
Date