

READ CAREFULLY

USE BALLPOINT PEN OR TYPEWRITER

WEST VIRGINIA UNIVERSITY INSTITUTE OF TECHNOLOGY

**OFFICE OF THE REGISTRAR
MONTGOMERY, WEST VIRGINIA 25136**

**TRANSIENT APPLICATION AND APPROVAL
TO ENROLL FOR COURSES AT ANOTHER INSTITUTION**

NAME: _____ STUDENT NO.: _____

HOME ADDRESS: _____
Street or Box Number City State Zip

MAJOR: _____ CLASSIFICATION: FR SOPH JR SR
(circle one)

The following courses have been approved for this student to be taken at:

_____ Name of Institution Mailing Address
during the _____ Semester Year

West Virginia University Institute of Technology

Comparable Course at Approved Institution

Subt.	Course No.	Course	Credit

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APPROVED:

ACADEMIC ADVISOR'S SIGNATURE

DEAN'S SIGNATURE

NOTE: Students in bachelor degree programs (4 yr.) must complete 30 of their last 36 hours in residence. Students in associate degree programs (2 yr.) must complete 15 of their last 21 hours in residence.

Quality Points earned at another institution may not be used to remove quality point deficiencies incurred at WVU Tech.

Upon completion of these courses, I will have a transcript mailed to the Records Office, West Virginia University Institute of Technology, Montgomery, WV 25136. If candidate for graduation, transcript must be received no later than ten (10) calendar days after Commencement date. *This is your responsibility.*

Date: _____ Student Signature: _____

This form is not valid unless it contains approving officers original signature and impress seal.

SEAL _____
Approving Officer of Registrar's Office

(Return Completed Form to Office of Registrar's Office, Room 210, Old Main)

White Copy: Transient Institution

Yellow Copy: Registrar's Office

Pink Copy: Students Copy