



Office of the Registrar Transient Student Permission Form

♦Office of the Registrar ♦1900 Belmont Blvd. Nashville, TN 37212 ♦615-460-6619

INSTRUCTIONS: Submit this completed form to registrar@belmont.edu or bring it to Belmont Central.

Name: _____
First
Middle
Last

Secondary Institution: _____

Indicate how you would like this form to be sent to the secondary institution and provide the relevant sending information below:

Email: _____ Fax: _____

Mail: _____
Street
City
State
Zip Code

Provide the **previously approved**, (either through Concurrent Enrollment or via specific pre-approved Tennessee Community College courses) course code information below.

Concurrent College/Univeristy Transfer Course Title and Number	Credits	Belmont Univeristy Title and Course Number	Credits
<i>Example: ENGL 1010 (Nashville State)</i>	<i>3</i>	<i>Example: ENG 1010 (Belmont)</i>	<i>3</i>

Student's Signature: _____ **Date:** _____

This letter is to verify that the student above is in good academic standing at Belmont University. The student has completed the Concurrent Enrollment process and has permission to take courses as a transient student.

Office of the Registrar: _____ **Date:** _____
Signature

Print Name: _____ Title: _____