

## OFFICE OF THE REGISTRAR

## TRANSIENT STUDENT FORM

| Name:                                      | ID #:   |
|--|---|
| Address:                                   |   |
| Transfer Institution<br>Course # and Title | Philander Smith College<br>Course # and Title |
| 1  | 1   |
| 2  | 2   |
| 2  | 3   |

**PHILANDER SMITH COLLEGE WILL NOT** accept any credits earned at other institutions during a period of academic suspension. It is the responsibility of the student to complete all requirements for transient students at the institution listed above and to see the credit is transferred back to Philander Smith College upon completion of credits at the above institution.

| Major Advisor                       | Date |
|-------------------------------------|------|
| · <b>J</b> · · · · ·                |      |
|                                     |      |
|                                     |      |
| Division Chair                      | Data |
| Division Chair                      | Date |
|                                     |      |
|                                     |      |
| Vice President for Academic Affairs | Date |
| Vice I resident for Academic Analis | Date |
|                                     |      |
|                                     |      |
| Registrar                           | Date |
|                                     |      |
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