



Transient Student Authorization Request (Taking classes at another College)

Pensacola State College ID _____ Last Name _____ First _____ MI _____

Address _____ City _____ State _____ Zip _____

Student Date of Birth _____ Pirate Mail _____@students.pensacolastate.edu _____

TRANSIENT STUDENT STATUS IS REQUESTED AS FOLLOWS:

Name of Institution for Transient Status _____ Location of College (City/State) _____ Term of planned enrollment _____

Only two courses per form; use additional forms if necessary

Courses to be taken				Pensacola State College Equivalent		
Course #	Course Title	Credits	Is this a distance learning course?	Course #	Course Title	Graduation Category

I find it necessary to take this course/these courses at another institution because _____

Please carefully read the following conditions for transient authorization:

- I must be eligible for the course at Pensacola State College before approval will be granted to take it at another institution.
- Upon completion of the course(s), I must request an official transcript to be sent directly to the Pensacola State College Registrar’s Office.
- Grades earned at other schools are used to compute the overall grade point average; grades earned at other schools are not used to compute the Pensacola State College grade point average.
- General education courses designated as writing-emphasis courses and general education mathematics courses must be completed with grades of “C” or better.
- I understand that Transient Authorization may not be granted if the course is not needed for my degree/certificate at Pensacola State College.

Date _____ Student Signature _____

RECOMMENDATION OF PENSACOLA STATE COLLEGE

- _____ The above-named student is in good standing at Pensacola State College.
- _____ The above-named student is recommended with qualifications because of scholastic deficiency.
- _____ Course description/transfer eligibility verified.
- _____ All obligations to the College are satisfied.

RESIDENCY CLASSIFICATION AT PENSACOLA STATE COLLEGE: Florida Resident Alabama Resident Non-Resident

Comments: _____

The above-named student is hereby authorized to take the above course(s) during the term specified. Transfer credit for these courses will be acceptable upon the receipt of an official transcript according to the policies of Pensacola State College.

Date _____ Signature of Pensacola State College Official _____