

# PERMIT FOR TRANSIENT STUDY

for use by UNC Charlotte Undergraduate Degree Students only

If you are receiving Veteran's benefits, please notify the UNC Charlotte Veterans Service Office of all changes.

**SEE INSTRUCTIONS ON BACK**

**SENIORS ONLY: Have you applied for graduation?**  
 YES     NO

PLEASE PRINT FIRMLY

COMPLETE BEFORE ATTEMPTING COURSES

Name \_\_\_\_\_  
Last                      First                      Middle                      Student ID Number                      Major Department

Mailing Address \_\_\_\_\_  
Number and Street                      Local Telephone Number

\_\_\_\_\_ City, State, Zip                      \_\_\_\_\_ E-mail Address

Name of school you will be attending: \_\_\_\_\_

- NOTE:**
1. Complete this form and obtain approvals before attempting course(s).
  2. UNC Charlotte accepts a maximum of 64 hours from two-year institutions. \*
  3. No credit below "C" level will be accepted; quality points and averages do not transfer.
  4. Repeating UNC Charlotte courses at other schools will not improve your UNC Charlotte grade point average. You may not transfer courses that were taken and passed at UNC Charlotte.

Transient Study Courses				UNC Charlotte Equivalents				
Dept. Abbr.	Course #	Credits	Descriptive Title	Dept. Abbr.	Course #	Credits	Goals	Dept. OK Required

Term and year when course(s) will be completed

Fall     Spring     Summer    20 \_\_\_\_\_

\_\_\_\_\_  
Student's Signature                      Date

**FOR RECORDS & REGISTRATION OFFICE USE ONLY:**

Transfer Hours (two year school) \*    *No more than 64* \_\_\_\_\_

Total Hours Earned \_\_\_\_\_                      GPA \_\_\_\_\_

\_\_\_\_\_  
Registrar's Endorsement                      Date

Recommended: \_\_\_\_\_  
Department Chairperson                      Date

**ENDORSEMENT OF STUDENT'S COLLEGE DEAN**

To the Registrar: This request is     Approved     Not Approved    \_\_\_\_\_  
Dean

This is a waiver of the residence requirement for graduation.     Yes     No    \_\_\_\_\_  
College                      Date

**IF YOU ARE PREPARING FOR TEACHER CERTIFICATION, CONSULT THE COLLEGE OF EDUCATION**

Request:     Approved     Not Approved    \_\_\_\_\_  
Dean, College of Education                      Date