

NORTH CAROLINA AGRICULTURAL AND TECHNICAL STATE UNIVERSITY

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| For Office Use Only |
| Received: _____ |
| Date: _____ |
| Processed: _____ |
| Date: _____ |

Approval for Admission As a Transient (Visiting) Student

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| Office of Admissions (336) 334-7946 1-800-443-8964 Fax (336) 334-7478 |
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To Be Completed by the Student:

Students admitted as transient (visiting) students are required to submit this form with the summer sessions application. Print your name, SSN, and address (Permanent and Local) below. The bottom half of the form must be completed by your appropriate school/college/university official.

Name _____ SSN _____ - _____ - _____
Last First Middle

Permanent Address _____
Street City State Zip

Local Address _____
Street City State Zip

To Be Completed by the School/College/University:

The above named student's date of attendance is _____. This student is in good standing at _____ and therefore, has permission to take courses listed below at North Carolina A&T State University. He/She is classified as a Resident Non-Resident of North Carolina for tuition purposes.

Courses Requested (Department, Course Number and Section Number)

| Call Number | Dept. | Course # | Section # | Semester Hrs. | Day | Time |
|--|-------|----------|-----------|---------------|-----|------|
| FIRST SESSION / INTERSESSION / DUAL SESSION | | | | | | |
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| Call Number | Dept. | Course # | Section # | Semester Hrs. | Day | Time |
|-----------------------|-------|----------|-----------|---------------|-----|------|
| SECOND SESSION | | | | | | |
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Signed _____
 Title _____
 Contact Telephone Number (_____) _____
 College/School/University _____
 Date _____