



Central Carolina Technical College
Student Records Office
506 North Guignard Drive
Sumter, SC 29150

TRANSIENT STUDENT REQUEST FORM

This form is for CCTC students who are requesting permission for transient or concurrent enrollment at another institution accredited through an agency recognized by the U.S. Department of Education. The completed form must be submitted to the Student Records Office at CCTC. The signature of your advisor, department chair/program manager, and the registrar is required. **Permission is not granted to students who are on academic suspension.**

Full Name: _____ Student ID: C _____
Last Name First Name MI

Phone: _____ Program of Study: _____

Name and complete address of college/university you plan to attend:

Name: _____

Address: _____

Term/Year you plan to attend: ☐ Fall _____ ☐ Spring _____ ☐ Summer _____

Course(s) to be taken (print)

To be completed by Advisor ONLY

Course Prefix	Course Number	Credit Hours	Course Title	CCTC Equivalent Course (Course Prefix and Number)

I understand:

- It is my responsibility to comply with the transient institution's admission policies and application deadlines.
- If I register for course(s) not approved on this form, there is no guarantee course(s) will transfer back to CCTC.
- Course(s) must be part of the students program of study at Central Carolina Technical College.
- I must meet the prerequisites for the course(s).
- I must earn a minimum grade of "C" to be awarded transfer credit.
- I must request that my official transcript from the transient institution be sent to Student Records at CCTC.
- I must meet the residency requirements for my program by completing a minimum of 25% of my required coursework at CCTC.
- It is my responsibility to contact CCTC's Financial Aid Office if I have questions about my financial aid.

I have read and understand the information provided to me concerning this transient form.

Student's Signature: _____ Date: _____

Academic Advisor's Signature: _____ Date: _____
(or Department Chair/Program Manager)

Registrar's Signature: _____ Date: _____

FOR OFFICAL USE ONLY:

Student's current academic standing: _____

Revised 2024