EGSC Statesboro/GSU
Fall/Spring
Transient Student Instructions

CAREFULLY READ AND INITIAL OR SIGN AS INDICATED

In order to take transient courses at GSU during Fall or Spring semesters, you must:

Step 1 Make an appointment with your faculty advisor and the EGSC Statesboro Director to determine eligibility

Step 2 Complete all 3 pages of EGSC/GSU Transient Permission document; return it to EGSC Registrar’s Office (Swainsboro) along with:
   a. Approval from your Faculty Advisor & Director of EGSC Statesboro (required signature on Transient Permission Form)
   b. A copy of your EGSC class schedule for the transient term – you cannot change number of class hours once submitted.
   c. A copy of your EGSC transcript
   d. Course description(s) from the transient institution’s current catalog

**Other important information**

- EGSC will send the Transcript Request Form with the Transient Permission Form to GSU’s Registrar’s Office.
- If meeting EGSC graduation requirements depends upon satisfactory completion of the course(s) listed on this Transient Permission Form, you will not be allowed to graduate until an official transcript has been received from GSU.
- If the transcript has not been received by the start of the subsequent term, all registration is subject to cancellation until the official transcript has been received.
- In the event you are unable to attend the transient institution for the requested term, it is your responsibility to obtain a letter from the transient institution stating that you did not attend and submit it to the EGSC Registrar’s Office.
- East Georgia State College Registrar’s Office will, in concordance with federal and state financial aid regulations, verify your attendance with the Georgia Southern University Registrar’s Office. HOWEVER, it is ultimately your responsibility to ensure that registration is completed for the appropriate course and final grades are reported to EGSC.

Step 3 Your transient request WILL NOT be processed until you complete steps 1 and 2 above and you Initial below, indicating you have read, understand, and/or complied with each item listed.

_______ I have: a minimum EGSC 2.0 GPA; satisfied all CPC deficiencies and exited all Learning Support coursework

_______ I have not earned more than 30 cumulative hours (including earned hours from prior institutions)

_______ I understand an academic hold will be placed on my record until I provide the documentation mentioned above, and that my registration is subject to cancellation if I do not ensure a transcript has been received by the EGSC Registrar’s Office.

_______ I understand that if I choose classes that are not offered by East Georgia State College, or are considered out-of-program, they will not transfer back to EGSC to satisfy degree requirements. I will not be eligible for any financial aid through East Georgia State College and I will be responsible for full payment for those courses to GSU.

9300
EGSC Student ID # ____________________________ Student’s Signature ___________________________________________ Date ____________________________

Office Use Only

Copy to Student: ________
Copy to Financial Aid: ________

SOAhold ___ SOAPCOL___SAAADMS

Date Transient Form Sent: __________________________
Contact Information for Transient School:

Name: ____________________________________________
Email: ____________________________________________
Tel: (_____)____________________________________
FAX (_____)____________________________________

Follow up:
 Transcript received: ____________________________
Initials ____________

Initials ____________
**To Be Completed By Student:**
*Please use a ballpoint pen, press firmly, and print legibly.*

Name of Transient Institution: **Georgia Southern University**  
P.O. Box 8092  
Statesboro, GA 30460-8092

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Term __________ Year __________

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<th>Course Number</th>
<th>Course Title</th>
<th>Hours</th>
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Student ID Number: 9300  
EGSC  
Student ID Number: 900  
GSU  
Student Telephone Number: ____________

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Last Name ___________ First ___________ Middle ___________ Maiden (if applicable)

Current Mailing Address: __________________________________________________________

City __________________ State ___________ Zip _______

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Please note: You **MUST** have a current GSU application on file in order to take **ANY** transient courses. Required signatures below:

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Advisor’s Signature ____________________________________________________________  
Date ____________

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Director of EGSC Statesboro Signature ______________________________________________  
Date ____________

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Student Signature _____________________________________________________________  
Date ____________

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List course(s) you plan to take at Georgia Southern University. It is **your responsibility** to access the GSU Course Schedule for their course offerings and the GSU catalog for their course descriptions.

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Course(s) to be taken at transient institution **≠** -- Not equivalent to EGSC Course  
East Georgia State College Equivalent

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To be completed by the Registrar’s Office:

____ is in good standing at East Georgia State College and has approval to register with you for the above course(s).

____ is in good standing at East Georgia State College; the course(s) listed above are considered out-of-program and will **not** transfer back to our institution to satisfy degree requirements. Consequently, the student is **not** eligible for **any** financial aid through East Georgia State College for course(s) listed above.

____ does not have permission to register with your institution for any courses.

____ other: ________________________________

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Registrar’s Signature ________________________________________  
Date ____________
Georgia Southern University
ATTENTION: Office of the Registrar
P.O. Box 8092
Statesboro, GA 30460-8092

The EGSC Statesboro student below has requested and been approved transient status for the __________ Semester. As with all other EGSC/GSU Fall or Spring transient courses, attendance verification and final grades will be submitted directly to the EGSC Registrar’s Office.

The student also requests that an official copy of his/her transcript be sent to East Georgia State College at the conclusion of this term, to:

East Georgia State College
ATTENTION: Office of the Registrar
131 College Circle
Swainsboro, GA 30401

Last  First  Middle  Maiden

Student’s Current Address  City  State  Zip

9300  900

East Georgia State College Student ID Number  Georgia Southern University Student ID Number

Current Telephone  Date of Birth  Last Four of SSN

(______)______-______________

Student Signature

Date