

Transient Student Approval Form

Transient Student Information:

A Victoria College application for Admissions (requesting Transient Student Status) must be on file with the Admissions and Records Office prior to registration. High School and college transcripts are not required. This Transient Student Approval Form should be submitted to the Admissions and Records Office at Victoria College prior to registration. Once the completed form and steps 1-3 listed below are completed, the Victoria College Admissions & Records Office will register the student and will contact the student directly either through email or phone.

TRANSIENT STUDENT REGISTRATION STEPS:

- 1.) Submit application for admissions by applying through <https://goapplytexas.org/>
- 2.) If under the age of 22, submit proof that you have received the bacterial meningitis shot or submit the waiver form.
- 3.) Hand deliver, mail or email the completed form **with the VC CRN** to the Admissions and Records office at Victoria College.
- 4.) Once registered, go online to myv.victoriacollege.edu to view your schedule and pay your tuition and fees.

Full Name: _____ Victoria College V-number: _____

Date of Birth: _____ Last four of Social: _____

Email: _____ Phone: _____

Intended Term of Enrollment at Victoria College:

- Fall Semester Spring Semester Summer Session(s) Interim Session

****Transient Student Form will not be processed until all information in the below chart is filled out.**

Course Prefix	Course Number	Course Title	VC CRN Found on the VC Schedule www.victoriacollege.edu/classschedule
<i>Example: ENGL</i>	<i>1301</i>	<i>English Composition I</i>	<i>10123</i>

TO BE COMPLETED BY THE STUDENT'S HOME COLLEGE/UNIVERSITY PERSONNEL:

Is this student in good academic standing? Yes No

Please indicate which area(s) this student is TSI complete in: Math Reading Writing

Transfer credit for these courses will be acceptable upon successful completion of these courses work and upon the receipt of an official transcript.

Home College/University: _____

Name of Certifying Official: _____ Title: _____

Phone Number: _____

I understand the transient policy stated above and request permission to take the above listed course(s).

Both Signatures are Required

Student's Signature

Home Institution Certifying Official

Date:

Date: