



ACADEMIC SERVICES

TENNESSEE TECH

REQUEST TO STUDY AT ANOTHER INSTITUTION

Student Name: _____ T#: _____ Term: _____
(Last) (First) (MI)

Student Email: _____

Major: _____ Class: _____ Graduation Date: _____

Course(s) to be taken by extension or in-residence at: _____
(Name of Institution)

This form should be filed by any student desiring to enroll for extension work or in-residence work at another institution with the intention of transferring the credit to Tennessee Tech. Official transcripts of such study should be furnished immediately upon completion of work. See the Catalog and Student Handbook for residence requirements for graduation and for regulations concerning courses. Submit this form to the Registrar's Office, Jere Whitson 221, after you have obtained the necessary signatures below.

TRANSFER WORK WILL BE AWARDED IF FROM A REGIONALLY ACCREDITED INSTITUTION.

Disc.	Course No.	Course Title	Sem. Hrs.	Online Course? (Yes or No)	No. & Title of TTU equivalent course	Dates of Proposed Study (Beginning & End)	Cr. Load at TTU during this period
						-	
						-	
						-	

I understand that approval of this request is effective only for the period indicated above.

Student Signature: _____ Date: _____

Approval Signatures:

Advisor: _____ Date: _____

Chairperson of the Department in which the work is offered on campus: _____ Date: _____

Dean of School or College in which enrolled: _____ Date: _____

Dean of College of Education
(If working toward teacher certification): _____ Date: _____