



TRANSIENT STUDENT AUTHORIZATION FORM

OFFICE OF THE REGISTRAR

2600 Sixth Street S.W.
Canton OH 44710

Phone: 330-363-1232

Fax: 330-580-6654

INSTRUCTIONS

1. Please review the ACNHS transient request policy and procedures for complete eligibility requirements.
2. Fill out the student information portion of this form.
3. This form must be turned in to the Academic Advisor at least 10 days before anticipated date of registration.
4. A copy of the course description/(s) must be included with this form.
5. Only approved course work will receive credit at ACNHS.

STUDENT INFORMATION

NAME			SOCIAL SECURITY NUMBER		
STREET ADDRESS					
CITY				STATE	ZIP
HOME PHONE			CELL PHONE		
INSTITUTION STUDENT WILL ATTEND					
INSTITUTION ADDRESS					
TERM ATTENDING AS A TRANSIENT STUDENT					
TERM: <input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER YEAR: 20_____					
INSTITUTION STUDENT WILL ATTEND			AULTMAN COLLEGE EQUIVALENT		
DEPARTMENT/ CATALOG NO.	COURSE TITLE	CREDIT HOURS	DEPARTMENT/ CATALOG NO.	COURSE TITLE	CREDIT HOURS
SIGNATURE OF STUDENT				DATE	
This Academic Advisor supports and recommends registration for the above courses.					
SIGNATURE OF ACADEMIC ADVISOR				DATE	

TO BE COMPLETED BY THE OFFICE OF THE REGISTRAR

This is to certify that the above-named student (is in good standing/ is not in good standing) at Aultman College and has permission to register as a Transient Student at _____

NAME OF COLLEGE OR UNIVERSITY

REGISTRAR

DATE



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Procedures

Note: While enrolled at ACNHS, a student may take a maximum number of 6 credits at another college. These 6 credits will be included in the total number of transfer credits allowed.

1. Complete the Transient Student Authorization Form at least ten working days, but no more than three months, before the anticipated date of registration for the course. **Incomplete forms will not be processed but will be returned to you via e-mail within 10 business days.**
2. Provide information on the course numbering system of the school to be attended (usually found in the school's catalog) so the level of the course can be verified. Also, be certain to indicate whether the number of credit hours is quarter hours or semester hours. Under "Equivalent ACNHS Course," list the ACNHS course you believe is the equivalent of the course to be taken at the other school.
3. After action has been taken on your request, a copy of this form will be e-mailed to you within 10 business days. **If your request is approved**, a copy of this form will also be forwarded to the other school by the Registrar. It is your responsibility to comply with any requirements that the other school may have regarding this coursework.
4. It is your responsibility to have an official transcript sent from the other school. Students should have their official transcripts sent to Aultman College of Nursing and Health Sciences, Office of the Registrar, 2600 Sixth Street, SW Canton, Ohio 44710-1799.
5. Concurrent Enrollment (A student enrolled at ACNHS and another institution simultaneously)
 - a. The student must declare a home institution
 - b. The student must adhere to the home institution's policy on concurrent enrollment status.
 - c. Federal regulations prohibit students from receiving Title IV (federal) financial aid funds from more than one institution during the same semester. If you are eligible for federal aid, a consortium agreement is needed before any funds are disbursed by the home institution.
6. Mail or submit this form and attachments to:
Aultman College of Nursing and Health Sciences
2600 Sixth Street, SW
Canton, Ohio 44710-1799
Attention: Student Advisor, Learning Resource Center Room 266