

REQUEST FOR LETTER OF TRANSIENCY

****This form is for A&S students who will be attending an Alabama Junior College and for ALL Nursing students, regardless of where you will be attending.****

Full Name: _____

CWID: _____

Date of Birth: _____

Telephone#: _____

Divisional School (circle one): Nursing Arts & Sciences

Today's Date: _____

Transient School: _____ **State:** _____

Campus Location(City): _____

Term taking class(es): _____

PLEASE LIST THE COURSES YOU HAVE BEEN ADVISED TO TAKE:

| Transient Course # | UA Course # | UA Course Title | Credit Hours |
|--------------------|-------------|-----------------|--------------|
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