



**G R I F F I N
T E C H N I C A L
C O L L E G E**

Transient Letter Request

Name: _____ SS#: _____

Phone number: day (_____) _____ evening (_____) _____

Program: _____ DIPLOMA DEGREE CERTIFICATE

Quarter Effective: SUMMER FALL WINTER SPRING Year: _____

Name of Host School: _____

Do you receive financial aid from Griffin Technical College? YES NO

Requested Course(s):	Is this course through GVTC?	Credit Hours
_____	YES NO	_____
_____	YES NO	_____
_____	YES NO	_____
_____	YES NO	_____

I understand that I must be a student in Good Standing at Griffin Technical College in order to qualify for transient status. Upon completion of the above course(s), I must request an official transcript to be forwarded to my home school, Griffin Technical College, to ensure proper credit is awarded. I understand that I may be responsible for any and all financial obligations to the host College, for the courses and materials, whether or not I receive financial aid.