



Application for Enrollment as a Transient/Visiting Student

Have you ever attended Defiance College? Yes No Date attended _____

 Last Name First Name Middle Name Date of Birth

 Street Address City State Zip Code

Day Telephone (_____) _____ - _____ Social Security # _____ - _____ - _____

Last college attended and date of attendance _____

You will be charged a \$25 transient fee each semester that you enroll as a transient student. Included in this fee is a transcript, which is automatically sent after semester, to the address you indicate. **Please give us a complete mailing address.** Transcript to be sent to:

I am applying for admission to Defiance College as a transient student for: Academic Year _____

<u>Summer Session I</u> Course No. _____ Credit Hrs. _____	<u>Summer Session III</u> Course No. _____ Credit Hrs. _____	<u>Fall</u> Course No. _____ Credit Hrs. _____
<u>Summer Session II</u> Course No. _____ Credit Hrs. _____		<u>Spring</u> Course No. _____ Credit Hrs. _____

If you are currently enrolled at another institution, you must have the Registrar of that institution approve your enrollment at Defiance College as a transient student.

TO BE COMPLETED BY REGISTRAR:

This is to certify that the above student is in good standing and has permission to enroll as a transient student at Defiance College.

 Name of Institution

 Address City State Zip

 Registrar's Signature

 Date

Please return this entire form to:

Registrar Office, Defiance College
 701 N Clinton St.
 Defiance, OH 43512
 Phone: 419-783-2551
 Fax: 419-783-2579
 registrar@defiance.edu

Office Hours: 8:00 to 4:30 pm M-F