



# Application for Transient Coursework

## OFFICE OF THE REGISTRAR

Bethany ID: \_\_\_\_\_ Date: \_\_\_\_\_

Current Class Level: FR SO JR SR

Student Name: \_\_\_\_\_

Major: \_\_\_\_\_

\*Prior to registering at another college, you must verify that the courses you wish to take are equivalent to Bethany College Courses.

- **You must obtain approval from the Department Chair for each specific course.**
- **In order for credits to transfer, you must achieve a grade of "C" or better.**

**UPON COMPLETION OF THE COURSE, IT IS YOUR RESPONSIBILITY TO HAVE AN OFFICIAL TRANSCRIPT SENT TO THE REGISTRARS OFFICE. OFFICIAL TRANSCRIPTS MUST BE SENT TO: OFFICE OF THE REGISTRAR BETHANY COLLEGE PO BOX 458 BETHANY, WV 26032**

Semester taking course: \_\_\_\_\_

Institution Attending and address: \_\_\_\_\_  
 \_\_\_\_\_

Courses to be taken at the Institution listed above		Bethany College Courses that will be satisfied		Dept. Chair Signature
Course Number and Section	Credit Hours	Course Number and Section	Credit Hours	(Must have signature for final approval)

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN THIS FORM TO THE REGISTRAR'S OFFICE PRIOR TO TAKING THE COURSE.**

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 Date Received by the Registrar's Office: \_\_\_\_\_ Date Completed by Registrar: \_\_\_\_\_

Registrar Signature: \_\_\_\_\_