

# REQUEST TO ENROLL AS A VISITING STUDENT

## COLLEGE OF EDUCATION & HUMAN DEVELOPMENT

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

Date: \_\_\_\_\_

Student ID #: \_\_\_\_\_

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

Graduate

Undergraduate

Post Baccalaureate

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_

I request permission to enroll in the following course(s) as a visiting student:

Course Title	Course Number	Credit Hours

Host Institution: \_\_\_\_\_ Semester you intend to enroll: \_\_\_\_\_

Address: \_\_\_\_\_

If the student is suspended or dismissed from the College of Education & Human Development after this letter is sent and the student enrolls at the above-name institution, any credits earned will not transfer or alter the student's status in any way.

*I understand that upon the completion of coursework, it is my responsibility to request that the host institution send an official transcript to the University of Louisville and that the credit will not be added to my record until the official transcript indicating a satisfactory grade is received by the University of Louisville. If I am a graduate student, I will need to ask my faculty advisor to process a "Transfer of Credit" form as well.*

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

----- **THE BOTTOM SECTION IS FOR OFFICE USE ONLY** -----

The Student's Academic Status is:

Good Standing

Warning

Probation

Special

Faculty Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by the Dean?    Yes                  No

Dean's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<p><b>Date Dean's Office Requested UofL Registrar's Office Send Visiting Student Letter to Host Institution</b></p> <p>_____</p>
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