

Away Approval

If you are a Washington County Community College Student and you want to enroll in courses to complete your degree requirements at another college and transfer these credits back to WCCC, you must meet with your Advisor to review your program requirements, complete this form and attach a copy of the course(s) description. The course(s) will be reviewed for relevancy toward your program of study and a copy of this form will be returned to you with a decision. Students must be enrolled at least half-time (equivalent of 6 semester hours) at WCCC for away courses to be considered in financial aid calculations.

Last Name: _____ First Name: _____ M.I.: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Phone Number: _____
Cell phone carrier: US Cellular Verizon AT & T Tracfone Other _____

Student ID #: _____ Email address: _____

Advisor: _____ Program of Study: _____

I am applying to take classes at: _____
(Complete one form for each semester and each school you plan to attend)

Will you apply for Veterans Benefits or Financial Aid from WCCC for this course(s)? Yes No

I understand that I will be expected to follow payment requirements at the above-named school regardless of my receipt of financial aid or veterans benefits at WCCC. Available aid will not be transferred by WCCC to the other school until the course is approved and my enrollment is verified. ***I acknowledge that I MUST provide an official transcript to the WCCC Coordinator of Enrollment & Student Services at the completion of the semester.***

NOTICE: ONLY THOSE CLASSES WHICH FULFILL REQUIREMENT TOWARD YOUR CURRENT WCCC PROGRAM OF STUDY WILL BE APPROVED

List the course title and number of credit hours for each class you will take at the other school. A minimum grade of "C" is required for a course to transfer to WCCC.

FOR OFFICE USE ONLY

| Course # | Course Title | Credit Hours | WCCC Course Equivalent | Approved | Not Approved |
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This form must be submitted to Anne Donahue, Coordinator of Enrollment & Student Services the semester before or prior to semester start in which you are applying to take the course at another institution.

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

Coordinator of Enrollment & Student Services: _____ Date: _____