

Admissions Office

GRADUATE TRANSIENT CERTIFICATION OF GOOD STANDING

STUDENT INFO		o be completed by the graduate student. sient application for admission. Please pr	
FIRST NAME	LAST NAME	М.1	TERM AND YEAR REQUESTING REGISTRATION:
FORMER/MAIDEN NAME		DATE OF BIRTH	SUMMER FALL YEAR
PERMANENT STREET AD	DDRESS		☐ SPRING
СІТУ	STATE	ZIP	NAME OF INSTITUTION WHERE YOU EARNED YOUR UNDERGRADUATE DEGREE
EMAIL ADDRESS			UNDERGRADUATE DEGREE
HOME PHONE		CELL PHONE NUMBER	Note: Graduate transient students may be asked to provide official transcripts to verify that course prerequisites have been met.
This is to certify that the student named below is in good standing at our institution and is pursuing a graduate degree:			aduate school you are attending. This student has permission to enroll as a graduate transient student for one term only at Kent State University
NAME OF STUDENT			
NAME OF INSTITUTION			
CITY	STATE		
GRADUATE DEGREE PROGRAM			
SIGNATURE OF GRADUATE SCHOOL DEAN DATE			INSTITUTION STAMP OR SEAL
APPROVAL This section to be completed by Kent State University			
APPLICANT: E	ELIGIBLE	FOR ADMISSIONS TO KENT STATE UNIVERSI AS A TRANSIENT GRADUATE STUDENT.	ту
SIGNATURE OF DEAN O	COLLEGE OF INDEPENDENT SC	HOOL DATE	