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 Admissions.a@ptc.edu

International Transient Coursework Approval Form

Home Institution: _____ PTC ID: _____

INSTRUCTIONS:

1. The Student **MUST** complete and **SIGN** Section A of this form.
2. The Registrar (or designee) at your home institution **MUST** complete and **SIGN** Section B of this form.
3. The International Advisor (PDSO/DSO) **MUST SIGN** Section B indicating the student is in active status and that the home institution retains responsibility for the student (i.e., registration and maintenance of status in SEVIS).
4. The form can be submitted by mail, email or fax using the contact information above.
5. Once the completed form has been received, you will be given access to register for classes, review tuition deadlines and the drop dates for non-payment through PTC Pathway.

SECTION A (to be completed by student)

Name _____

Last Name
First Name
Middle Initial
Phone Number

Address _____

City _____ State _____ Zip Code _____

Email _____ Date of Birth _____

Term course(s) to be taken: Fall _____ Spring _____ Summer _____ Year _____

Please sign and date acknowledging that you have read the information below:

- Please refer to the South Carolina Transfer and Articulation Center website for course equivalencies, www.sctrac.org.
- I understand that if I register for course(s) not approved on this form, I assume full risk of transferability.
- I understand that if I elect to complete the courses below in an online format, proctored exams are required. Electing to have the exam proctored by an institution other than PTC may result in additional charges with that institution.
- I understand that I am responsible for requesting my official transcript to be sent to my home institution via www.getmytranscript.com.

Student Signature **Date**

SECTION B (to be completed by Home Institution) (Courses to be taken at PTC)

Prefix	Number	Course Title

This signature certifies that the student is authorized to take the course(s) listed above. The signature further indicates the student is in active status and that the home institution retains responsibility for the student (i.e., registration and maintenance of status in SEVIS).

Registrar's Signature (or designee) **Date**

PDSO/DSO (International School Official) **Date**

Office Use Only:
 _____SAAADMS _____SFASRPO (if needed) Date Keyed: _____ Initials: _____