



# MARION MILITARY INSTITUTE

1101 Washington Street  
Marion, Alabama  
36756



## OFFICE OF ACADEMIC AFFAIRS

### TRANSIENT APPROVAL FORM

CADET'S FULL NAME: \_\_\_\_\_

STUDENT #: \_\_\_\_\_ SEMESTER YOU PLAN TO ATTEND: \_\_\_\_\_

COLLEGE YOU PLAN TO ATTEND & LOCATION: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

LIST COURSE(S):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

**NOTE:** Please list the courses as they appear in the course catalog of the college you wish to attend

\_\_\_\_\_  
CADET'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ADVISOR'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
REGISTRAR'S SIGNATURE

\_\_\_\_\_  
DATE

**\*The above student is in good standing and able to return**