



VISITING STUDENT APPROVAL FORM

Complete this form and submit it to your College/University for approval. Submit form to Admissions & Registration at the Community College of Beaver County prior to registration for the course(s) which have been approved.

Name	Date	CCBC ID #
Address	Phone #	Date of Birth
Home College/University		Home College/University Advisor

Course(s) will be taken at the Community College of Beaver County for the following Year and Semester.

_____ **FALL** _____ **SPRING** _____ **SUMMER**

CCBC COURSE #	COURSE NAME	CREDITS		HOME COLLEGE/UNIVERSITY COURSE #
			=	
			=	
			=	

THIS SECTION IS TO BE COMPLETED BY YOUR HOME COLLEGE/UNIVERSITY.
 The above named student is granted approval to enroll as a visiting student at the Community College of Beaver County for the course(s) listed above.

Advisor Signature	Date
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If you have additional questions or need to register over the phone please contact Admissions & Registration at 724-480-3504