



### VISITING STUDENT VERIFICATION FORM

An application for admission to Elizabethtown Community & Technical College must be submitted in addition to this form. Unofficial transcripts and/or ACT/COMPASS scores may be required at the advising session. By signing this form you authorize the release of the requested information to Elizabethtown Community and Technical College.

Name of Student: \_\_\_\_\_

ECTC Student ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

I would like to register for:  On-line Classes  On-Campus Classes Enrollment Year: \_\_\_\_\_  
 Summer  Fall  Spring

I authorize the release of the requested information to Elizabethtown Community & Technical College:

\_\_\_\_\_  
 Student's Signature Date

#### THE SECTION BELOW MUST BE COMPLETED BY THE INSTITUTION YOU ARE CURRENTLY ATTENDING.

**VISITING STUDENT ADMISSION POLICY:** The student whose name appears on this form desires to complete course work at Elizabethtown Community & Technical College and apply the credit toward a degree at your institution. ECTC does not require official college transcripts for visiting students. However, it is our policy not to admit students who have been academically dismissed or are ineligible to return to the home institution.

**INSTRUCTIONS:** Please indicate student status, approved courses, transfer equivalency for each course, sign, and affix official seal.

Student is eligible to return  Student is NOT eligible to return

Recommended ECTC course(s):	Home institution equivalency:

**AFFIX  
 OFFICIAL  
 SEAL**

\_\_\_\_\_  
 Registrar/Advisor Date

\_\_\_\_\_  
 Name of Home Institution