

**BERGEN COMMUNITY COLLEGE  
REGISTRATION OFFICE  
REQUEST PERMISSION TO TAKE COURSE AT ANOTHER INSTITUTION**

(A grade of "C" or higher must be attained in order to receive transfer credit)  
(P/F grades are not accepted unless it is remedial)

Please print or type  
Name \_\_\_\_\_  
Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_ Social Security # \_\_\_\_\_  
Address \_\_\_\_\_ Home Phone # \_\_\_\_\_  
Bus. Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Present Status (Check One Only):    FT Degree Seeking ( )    PT Degree Seeking ( )  
Current Curriculum Code: \_\_\_\_\_ Semester/Year of Acceptance: \_\_\_\_\_

I request permission to take the following course: \_\_\_\_\_  
Dept. Code \_\_\_\_\_ Course Number \_\_\_\_\_

For the following Semester/Year: \_\_\_\_\_  
Course Title \_\_\_\_\_  
Semester \_\_\_\_\_ Year \_\_\_\_\_

At the following Institution: \_\_\_\_\_  
Name of College/University \_\_\_\_\_  
Address \_\_\_\_\_

This course is to meet the requirements of the following Bergen Community College course:

Dept. Code \_\_\_\_\_ Course Number \_\_\_\_\_ Title \_\_\_\_\_

Signature of Student \_\_\_\_\_ Date of Request \_\_\_\_\_

Department Chair \_\_\_\_\_ Date of Approval \_\_\_\_\_ Pink: Student  
White: Transfer Evaluator Rm. A-129 Yellow: Division