



Permit Authorization Contract

Name: _____

BPCC Student ID: _____ Semester: _____

Preferred Email: _____

College/University Transcript Required:	<input type="text"/>	ACT Scores needed:	<input type="text"/>
Student Permitted into BPCC Course:	<input type="text"/>	Session (A, B, C, etc.):	<input type="text"/>
	Subject		Course Number
College/University Transcript Required:	<input type="text"/>	ACT Scores needed:	<input type="text"/>
Student Permitted into BPCC Course:	<input type="text"/>	Session (A, B, C, etc.):	<input type="text"/>
	Subject		Course Number
College/University Transcript Required:	<input type="text"/>	ACT Scores needed:	<input type="text"/>
Student Permitted into BPCC Course:	<input type="text"/>	Session (A, B, C, etc.):	<input type="text"/>
	Subject		Course Number

- I understand that as a result of being permitted into the above course(s), an official copy of my college/university transcript or ACT scores must be received by the Admissions/Registrar's Office as soon as possible.
- I understand a hold will be placed on my account until the official transcript has been entered on my student record.
- I also understand that all coursework from the submitted transcript will be entered on my student record which may affect my ability to receive financial aid.

Student Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

The advisor/division representative must submit this form to the Admissions/Registrar's Office.

Course Entered in Banner by: _____ Phone: _____