TO:			
Please sign this form and forward it to your graduate instit	ution.		
I hereby authorize the release of the following information Martin.	to the Graduat	e Studi	es Office at UT
Name			
SSN			
Date			
The individual identified above has applied for transient st In order to satisfy our transient admission requirements, p directly to the address given below.			
Has this student been admitted to graduate study at your institution?	Circle one:	Yes	No
Is the student in a graduate degree seeking status?	Circle one:	Yes	No
Is the student in academic good standing?	Circle one:	Yes	No
Signature of Graduate School Personnel			
Date			
Name of your institution		_	
Address		_	
		=	
		_	
Poturn to Graduato Studios			

Return to Graduate Studies
The University of Tennessee at Martin
227 Administration Building
Martin, TN 38238