



ABRAHAM BALDWIN AGRICULTURAL COLLEGE

Request to Change From Regular Student to Transient

Name:	
Banner ID Number:	
Street or PO Box:	
City, State, Zip Code:	
Phone Number:	
Major:	
Degree:	
Effective Term of Change:	
Date of Request:	
Reason for Request:	
Student Signature	

This completed request may faxed, mailed or delivered in person to:

**Office of Enrollment Services
ABAC 4, 2802 Moore Highway
Tifton, GA 31793-2601**

**(229) 391-5004 (Direct)
(229) 391-5002 (Fax)**