

International Student Transfer Clearance Form

This section to be completed by student

Student's Name: _____
Family Name First Name Middle Initial

Admission Number: _____
(Note: this is the eleven-digit number found on the top left corner of your I-94)

SEVIS ID# (if available): _____

Transfer Release Date: _____ Program Begins: _____

Current Address: _____
Street Name and Number

City State Zip Code

Telephone: _____

I give permission for my present school to release the information requested on this form.

Signature Date

This section to be completed by International Student Advisor

- Is the student currently attending the school the s/he was last authorized by the BCIS to attend?
Yes _____ No _____
____ Student did not report to this school
____ Student reported to this school, but did not complete registration process or attend classes
____ Student is currently enrolled in a full-time program, and has been enrolled since _____
____ Student DID NOT complete the course of study. The last day of attendance was _____
____ Student is in reinstatement or change of status proceedings, the SRC number (if known) is _____

2. Has the student had any financial difficulties with your institution? (Please provide additional information if necessary)

3. To the best of your knowledge, is this student "in status" with BCIS? (Please provide additional information if necessary)

Signature Name & Title Date

School address

Please return this form to:

Ryan Clarke
International Admissions Advisor
Morrisville State College
(315) 684-6046 (315) 684-6427 fax