

Transfer Verification Form

Congratulations on your admission to SUNY Morrisville! Federal regulations governing students in F and J status require we verify your enrollment status from the school you were last authorized to attend. Please have the International Student Advisor at your current school complete and return this form within 2 weeks of receiving it. If you are enrolled in a U.S. high school, give this form to the office at your school that issued your I-20.

<u>Section</u>	1: Your signature below indica	ates that you have aut	horized the release of	your student info	ormation.	
Printed Name		Signature		Date	Date	
Section	2: To be completed by the Inte	ernational Student Ad	visor at your current so	chool.		
Yes	The student was ente The student was enro Fall Spring The student was enro Fall Spring	The above-named student is authorized by the Department of Homeland Security to attend your school. The student was entered into SEVIS by your school. SEVIS ID: The student was enrolled for a full-time academic load for the term they were most recently registered: Fall Spring Summer Year The student was enrolled part-time for the term they were most recently registered: Fall Spring Summer Year Please explain the reason for part-time status:				
	periods of authorized Practical	Training with beginni	ng and ending dates. Optional Practical	Training (OPT)	Dates of OPT	
Currick	and Fractical Francisco (CFF)	Dates of ciri	Optional Fractical	Truming (OT 1)	Dates of Of 1	
The stud	dent's current non-immigrant	status is:	_ (F-1)	(J-1)		
The SEV	'IS release date for this studen	t is	Please provide a cop	y of the student	's I-20 if in F-1 status.	
SE	VIS name and code: SUNY C	College of Agricultur	e and Technology at	Morrisville BU	F214F10083000	
Name and Title of School Official (please print)				School Name		
Address	 ;			hone		
Email Sign		Signature		Da	 Date	

Please return via email to international@morrisville.edu or fax to 315-204-1116 to the attention of the PDSO.