International Student Transfer Form

The student below intends to transfer to Mississippi College. In accordance with regulations of the Immigration and Naturalization Service, we must verify the status of this student. Please complete and return this form to our office. Thank you for your assistance.

Student's Name _____ INS Admission Number _____
Last First MI

_____ F-1 Status _____ J-1 Status _____ Other

_____ The student is in good standing and has been pursuing a full course of study (or has been reinstated by INS)
_____ The student is out of status and reinstatement to student status was filed on ____/____/____ and is pending. Copies are attached.
_____ The student is out of status and we will advise him/her of the procedures for reinstatement with Immigration.
_____ The student has not fulfilled his/her financial obligations to the university/college.

Student's Level of Study at your School:

- _____ High School _____ Undergraduate _____ Graduate

- Date of student's last attendance: _____/_____/_____

- Is the student currently enrolled? _____Yes _____No If yes, _____quarter/semester _____year.

- Did the student complete his/her program? _____ Yes _____ No

- Indicate the expected graduation date that appeared on the I-20 form the student originally used when first enrolled at your school. _____/_____/_____ Please send a copy of the I-20 issued by your school.

- Would you recommend the student for transfer to our institution? _____Yes _____No

COMMENTS, or please call L. James Brackenridge at 601-925-7635, fax 601-925-3950, or email Brackenr@MC.edu

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_____ _____ _____
Name of School Name of DSO Title of DSO

_____ _____ _____
Signature of DSO School's INS File Number Telephone Number

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