

International Student Transfer Eligibility Form

Complete this form only if you are transferring from a U.S. College or university

TO BE COMPLETED BY THE STUDENT:

NameFAMILY				
FAMILY	FIRST			MIDDLE
Address				
Phone number	Last q	uarter attended	I	<u></u>
I grant permission for the information re College.	equested below f	to be forwarded	I to South Puget	Sound Community
ignature Date				
TO BE COMPLETED BY THE [SCHOOLO	FFICIAL	
 The above-named student: Is enrolled full-time at the structure Is enrolled less than full 		Session	20	
 2. To the best of my knowledge, the above-named student is: In-status with respect to immigration regulations Out of status because: 				Please answer all questions and return to:
 Has the above-named student met all financial obligations to your school? Yes No, because: 				International Student Services South Puget Sound Community College 2011 Mottman Road S.W. Olympia, WA 98512-6292 Tel; (360)
4. Student's SEVIS number				
5. Release date from your school				E mail:
Name of school				If you have any
Address				questions, please contact us at any time.
Signature Date Date			— Thank you very much.	
Name and Title				
Phone number				