

Transfer Form for International Students: Presentation College

SECTION I

TO BE COMPLETED BY THE STUDENT:

The USCIS requires this office to have the following information in order to process your transfer to Presentation College. The information below needs to be completed by you (Section I) as well as an official at your present school (Section II). Please complete the information in Section 1 and submit this letter to the International Student Advisor (Designated School Official) at your present school, who can fax or send us the form. When you arrive at Presentation College, please contact India Klipfel at 605.229.8492.

Name of Student _____ Birthdate _____
Last First Middle month/day/year

United States Social Security Number (if applicable) _____

Country of birth _____ Country of Citizenship _____

I request and authorize my present International Student Advisor (Designated School Official) to provide the information in Section II as a part of my application for admission to Presentation College.

Student Signature _____ Date _____

SECTION II

TO BE COMPLETED BY THE DESIGNATED SCHOOL OFFICIAL:

Please return this form to India Klipfel, Presentation College, 1500 N. Main St., Aberdeen, SD 57401. Fax 605.229.8425, phone 605.229.8492 or india.klipfel@presentation.edu.

(Please "X" or fill in appropriate information below)

1. _____ The student is in good standing and is/has been pursuing a full course of study.
_____ The student is out of status and a reinstatement to student status was filed
_____ The student is out of status, and we will advise him/her to apply for reinstatement upon receipt of a new I-20 from Presentation College.
2. Student's projected date of completion (from I-20) _____
3. The student's date of last attendance at our school: _____
4. Student's SEVIS ID NUMBER _____
5. Date of SEVIS TRANSFER _____
6. _____ During his/her attendance at our school, the student completed an intensive English/ESL program.
_____ During his/her attendance at our school, the student did not complete a degree program.
_____ During his/her attendance at our school, the student completed the following degree program(s):

Type of Degree	Date of Completion
_____	_____
7. Has the student had any financial difficulties at this institution? () YES () NO
If yes, please explain _____

Name and Title of DSO

Signature

Name of Institution

Date

Address

Telephone Number

E-mail