



INTERNATIONAL STUDENT TRANSFER FORM

DATE: _____

FROM: Dixie State University

TO: _____

Please sign the release of information section of this form and give it to your international student advisor at the school you now attend or most recently attended.

I grant permission for the information requested below to be released to Dixie State University.

Applicant's Name (please print)

Applicant's Signature

TO BE COMPLETED BY THE DESIGNATED SCHOOL OFFICIAL

The above-named student has qualified academically for admission to Dixie State University. Please complete the following and return to Michael Thompson, Dixie State University, 225 South 700 East, St. George, UT 84770 or fax to 435-656-4070.

Student's SEVIS Number: _____ SEVIS Transfer Date: _____

Current Status, check all that apply:

- _____ The student is in good standing and is/has been pursuing a full course of study (or has already been reinstated to status by INS).
_____ The student is out of status and a reinstatement to status was filed on _____ at INS (District: _____) and is pending. (Enclose copy filed)
_____ The student is out of status, and we will advise him/her to apply for reinstatement upon receipt of a new I-20AB from Dixie State College.
_____ Other: _____
- Date of last attendance at your school _____
- Does student qualify for a vacation period? _____
- Does this student have any outstanding financial obligation? _____
- Please indicate the dates of any practical training (curricular, optional, academic). Curricular _____ Optional _____ J-1 Academic _____

Name and Title of Designated School Official Completing This Form

Signature

Name of Institution

Date

Address

Telephone Number