

Temple College

NONIMMIGRANT TRANSFER-IN CLEARANCE FORM

International students transferring from a U.S. College or University to Temple College (TC) must submit the following information to verify their legal eligibility to transfer. The student or scholar completes Part 1, and the International Advisor at the student's previous school completes Part 2. **The student will not be permitted to transfer to TC if they are not in good standing with F1 visa and until the TC International Advisor receives this completed form and approves the transfer.**

Students must have a minimum 2.0 GPA in order to transfer to Temple College.

PART I (To be completed by the student. Please print or type.)

Name: _____

Last

First

Middle

Address: _____

Email: _____ Phone: _____ SEVIS ID: _____

Country of Citizenship: _____ Visa Type: _____ Gender: Male Female

I authorize my present International Student Advisor to provide the information in Part 2 of this form. I verify that (check one): I am in a lawful F-1 status and eligible to transfer to TC **OR** I am not in a lawful F-1, and have discussed my situation with the TC International Advisor.

Student's Signature

Expected TC Start Date

Expected SEVIS release date

PART II (To be completed by the International Advisor.)

The student is in good standing and in a lawful F-1 status, and is, to the best of my knowledge, eligible to transfer to TC.

The student is out of status and requires a Reinstatement **OR** a reinstatement application was filed on _____ and is pending with US CIS. Photocopies of the documents sent to US CIS are enclosed.

Other (please explain): _____

Additional information regarding the student or his/her immigration/academic status that would be important for TC to know: _____

Semester/quarter the student last registered full time at your institution (MM/DD/YYYY): _____

Date that term will /did end (MM/DD/YYYY): _____ **Anticipated SEVIS Release Date:** _____

Periods and Types of OPT, CPT, Academic Training completed, *if applicable*: _____

Name and Address of School: _____

Name (Print), Title, E-mail, and Phone # of International Advisor completing this form: _____

Signature of International Advisor

Date