

INTERNATIONAL STUDENT TRANSFER VERIFICATION FORM

As a part of the application admission requirement process, the **applicant is to complete SECTION I.** Section II is to be filled out by the Designated School Official.

SECTION I (Student) PLEASE PRINT

Social Security or Student Identification number that you indicated on your admission application to MTSU: _____

Last Name: _____ First Name: _____

Institution transferring from: _____

Date first attended: _____ Last date of attendance: _____

Type of program: _____ Country of citizenship: _____

I-94 Admission Number: _____ Date first began F-1 status: _____

SEVIS # _____ Completion date on current I-20: _____

Indicate if you will need MTSU's I-20 for traveling purposes before attending the semester? _____

If yes, make sure that you indicate this to your present DSO.

Please include a photocopy of the front and back of your I-94 card, any I-20 copies that have been issued to you from all institutions, photo page of passport and passport expiration page.

Signature: _____ Date: _____

SECTION II (DESIGNATED SCHOOL OFFICIAL)

Has this student maintained his/her student status? _____ Yes _____ No

Does this student need to apply for reinstatement? _____ Yes _____ No

Explain reason for reinstatement: _____

Practical Training Information

Please list the categories and dates of any pre-completion practical training:

_____ from: _____ to: _____

_____ from: _____ to: _____

_____ from: _____ to: _____

Please list the dates of any post-completion practical training?

Period: _____ from: _____ to: _____

Period: _____ from: _____ to: _____

Period: _____ from: _____ to: _____

Do you recommend this transfer? _____ Yes _____ No

If you answered No, please explain: _____

Date of transfer release in SEVIS _____ or situation of release _____

I certify that the preceding information is correct:

Signature of Designated School Official: _____

Name and Title of School Official: _____

Telephone #: _____ E-mail: _____

INS School File Number: _____ -214F _____

DSO MUST MAIL THIS FORM AND ATTACHMENTS DIRECTLY TO:

International Programs & Services Office
Keathley University Center
PO Box 100, Room 124
Murfreesboro, TN 37132