



Transfer Enrollment Status Form

Note: You can submit this form if you are in F-1 status. If you have never studied at a U.S. Institution before, please do not submit this form.

TO BE COMPLETED BY THE STUDENT

Last Name: _____ First Name: _____ Date of Birth: _____
Month/ Day/ Year

Current Address: _____

Email address: _____ Telephone: _____

SEVIS ID#: _____ I-94 (Admission #): _____

Requested Admission:

Session 1, 20__ Session 2, 20__ Session 3, 20__ Session 4, 20__ Session 5, 20__ Session 6, 20__

Will you be traveling before the start of the session?

Yes No If yes, when? _____
Month/Day/Year

Student's Signature: _____ Date: _____

TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR AT THE PREVIOUS INSTITUTION

The above-named student intends to transfer to Global ESL Academy (NYC214F01978000) for the session noted above. Please complete this form and return to the address below.

Yes No Is the student authorized by the Department of Homeland Security to attend your school and is/was the student maintaining F-1 student status as defined by the INS regulations?

Yes No Has the student been entered into SEVIS by your school?

Yes No Was the student enrolled in the full-time academic program?

If no, please explain why not. _____

Yes No Reinstatement recommended.

The student is/was enrolled for the _____ semester. The last date of attendance is/was: _____

SEVIS ID# N _____ SEVIS Release Date: _____

Comments: _____

_____/_____/_____
Name of School Telephone # E-mail

Address

Print Name and Title Signature Date