

## Transfer Release for F-1 International Students

Part I - This section is to be completed by the STUDENT:

Please complete Part I only and present the form to the immigration advisor at the institution you are currently attending or have most recently attended.

Last Name.	First Name:		Middle Initial:
Date of Birth (MM/DD/YY):	Email:	Telep	hone:
Anticipated Entry term at MassBa	ay (Semester/ Year):		_
I authorize my current college to r enrollment status	release information related to my	non-immigrant sta	itus as well as my
Student's signature:	D	ate:	
Part II - This section is to be considered above wishes to transfer to Mabelow and return to admission Please release the SEVIS reconsidered and the second section is to be considered as the section is the	assBay Community College. Pl ns@massbay.edu.	ease provide the	e information requested
SEVIS ID#	SEVIS Transfer F	Release Date:	
1. Is the student currently mainta	nining valid F-1 status?:		Date (MM/DD/YY)
2. Is the student eligible for trans	sfer notification?: O YES	O NO	
	sfer notification?: O YES		
If NO, please explain:	omplete studies on:	(Date)	
If NO, please explain:  3. Student is/was expected to co	omplete studies on:	(Date) dance on:	(Date)
If NO, please explain:  3. Student is/was expected to co  4. Student did not complete cou  5. The completion date on the cu	omplete studies on: urse of study, but terminated atten urrent/most recent I-20 is:	(Date) dance on: (Da	(Date)
If NO, please explain:  3. Student is/was expected to co  4. Student did not complete cou	omplete studies on: urse of study, but terminated atten urrent/most recent I-20 is:	(Date) dance on: (Da	(Date)
If NO, please explain:  3. Student is/was expected to co  4. Student did not complete cou  5. The completion date on the cu	omplete studies on: urse of study, but terminated atten urrent/most recent I-20 is: onal or Curriculum Practical Trainir	(Date) dance on:(Da	(Date)

Telephone: \_\_