



TRANSFER CLEARANCE FORM

Return to: International Student Advisor, Wiregrass Georgia Technical College, 4089 Val Tech Road , Valdosta, GA 31602

Telephone: (229) 249-4836 / Fax: (229) 333-2129

TO BE COMPLETED BY STUDENT

Student's Name: _____ Student ID#: _____

Student's Current Address: _____

Student's Telephone #: _____

I give permission for my present school to release the information requested on this form.

Signature

Date

TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR

- Is student currently attending the school last authorized by USCIS? Yes No
- Student is currently enrolled in a full-time program, and has been enrolled since: _____
- Student did not complete the course of study. His/her last day of attendance was: _____
- Student is in reinstatement or change of status proceedings, the receipt # (if known) is: _____
- Other: _____

1. Has this student had any financial problems with your institution? Yes No

2. To the best of your knowledge, is this student "in status" with USCIS" Yes No

If no, please explain on the reverse side.

3. SEVIS ID#: _____

4. Please indicate the dates of any practical training in which the student has participated:

Curricular _____ Optional _____ J-1 Academic Training _____

Transfer Clearance Date: _____

Signature of School DSO

Print Name and Title

Email of DSO

Date

School Name

Telephone Number

Fax Number

School Address: _____