

INTERNATIONAL STUDENT TRANSFER ELIGIBILITY FORM WORD OF LIFE BIBLE INSTITUTE

All international students holding a Student Visa (F-1) who are transferring from other U.S. institutions are required by our institution to submit proof of eligibility to transfer. Please fill out the information below and give this form to the foreign student advisor where you are currently enrolled or last attended.

Applicant's Name: _____

Current Address: _____
Street City State Zip Telephone

I request and authorize my present International Student Advisor (or equivalent official) to provide the information below as part of my application for admission to Word of Life Bible Institute.

Student Signature date

To be completed by International Student Advisor/Designated School Official (DSO):

1. BCIS Admission number _____ SEVIS ID Number: _____
2. Name of School exactly as it appears in SEVIS: _____
3. Address of School _____
4. Dates enrolled at your School _____
5. Last date of attendance (real or expected) _____
6. Did Student maintain full-time status? _____
7. If not, can you give the reason? _____
8. To the best of your knowledge, is Student in status with INS? _____
9. Does the student have any outstanding financial obligations to your school (yes or no)? _____
10. What will be the SEVIS transfer out date? _____
11. Has the Student taken part in any OPT or CPT? When? _____
12. Any comments that you feel have bearing on the student's eligibility to transfer _____

Signature of DSO _____

Name of DSO _____

Date _____

Phone number _____

Please return to:

Word of Life Bible Institute
Attn: International Student Advisor
PO Box 129
Pottersville, NY 12860-0129
Fax: 518-494-1534
Any questions can be directed to Adam Cook (PDSO) at (518) 494-1406.