

ROCK VALLEY COLLEGE

International Student Transfer Authorization Form

The student is responsible for completing the top part (part A) of the transfer form and taking it to the school that he/she is leaving. The institution that they are leaving should fill out the bottom part (part B) of this page and mail the form to the address at the bottom of the page.

Section A

To Be Completed By Student:

Name: _____
Last Name (Family Name) _____ First Name _____

Telephone Number _____ E-Mail: _____

Mailing Address _____ State _____ Zip _____

City of Birth _____ Country of Citizenship _____

I-94# _____ Social Security _____

Date of Birth _____

By Signing below, I authorize the International Student Advisor to provide the information requested.

Date

Student's Signature

TO Be Completed By DSO At The School You Are Leaving

- F-1
- J-1
- Other _____
- Student has been continuously enrolled full-time and is eligible for notification transfer.
- Student is not currently enrolled. The last term of enrollment was completed on _____
- The student is out of status. A reinstatement application was filed on _____
- The student is out of status _____

Comments

Please indicate any period of authorized practical training or off-campus employment.

Type of training or employment _____ Date _____

Type of training or employment _____ Date _____

Institution _____

DSO _____ Title _____

Signature _____ Date _____

Please return to:

Mary J. Foreman (Primary Designated School Official)
Rock Valley College
3301 N. Mulford Rd
Rockford IL 61114

Or fax to: (815) 921-4269