

**Student Transfer In Form**

UI Campus SEVIS ID#: SEA214F10060000

**Student:**

Please complete the top portion of this form, and then take it to the International Student Advisor at the program you are presently attending for verification and signature. If you have questions, please email [alcp@uidaho.edu](mailto:alcp@uidaho.edu).

**Student's Complete Name**

**Student ID Number**

**Date of Birth**

I hereby give my permission for \_\_\_\_\_ to release the following  
(Name of school presently attending)  
information to the University of Idaho, Moscow Campus.

**Student's Signature**

**Date**

**International Student Advisor or DSO:**

The above student has applied for admission to the American Language & Culture Program at the University of Idaho. Please complete the following information for the above student and scan or fax this form back to:

Email [alcp@uidaho.edu](mailto:alcp@uidaho.edu)

Fax 208/885.2859

Student Visa Classification/Status:

**F-1**

**J-1**

**SEVIS Identification Number:**

**Transfer Release Date:**

(This is the date on which a student's SEVIS Transfer will take effect)

**Yes**  **No** The student has maintained status and is eligible for transfer to the ALCP, University of Idaho.

**Yes**  **No** The student is currently enrolled.

If no, what is the last date of the student's attendance?

Date:

Current I-20 Expiration date:

**Yes**  **No** This will be the student's first transfer to a new language program/institution.

**Yes**  **No** The student attended 80% or more of classes. Please attach attendance record.

**Yes**  **No** The student was making satisfactory academic progress. Please attach grade report.

Reason for transfer:

**Signature of School Official**

REV032918

**Date**