Transfer Eligibility Form for International Students

Dear International Student:

Please ask the International Student Advisor or other official at the school you are currently attending or last attended to complete this form or return it to our department. The information is necessary for us to process your file.

Please return to: Barry University
Department of Recruitment and Admissions
11300 NE 2nd Avenue, Miami, FL 33161
Email: myapplicationdocs@barry.edu
Fax: 305.899.2971

To be completed by the student.

I authorize the school official named below to provide the information requested in this form.

_________________________ _______________________
(Student's Name) (Student's Signature)

■ What immigration status does this student have? ( ) F-1 ( ) Other

■ If F-1, what is the SEVIS identification number? __ __ __ __ __ __ __ __ __ __

■ What is the expiration date on the I-94? ( ) D/S ( ) Other __/__/____

■ When was the student last enrolled full time at your institution? __/__/____

■ To the best of your knowledge, is the student currently in status with UCIS? ( ) Yes ( ) No

■ Comments

__________________________________________________________________________________

__________________________________________________________________________________

■ Has the student been granted any employment authorization? ( ) Yes ( ) No

■ If yes, please list all types and dates of the student’s employment:

__________________________________________________________________________________

__________________________________________________________________________________

SEVIS Release Date __/__/____

School Official Name ____________________________ Title ____________________________

School Official Signature ________________________ Date __/__/____

Name, address, and phone of institution:

__________________________________________________________________________________

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