



Center for Global Engagement
International Student Services

PREVIOUS ENROLLMENT INFORMATION

To the Student:

Please read this form carefully and sign it in the space provided. Then present it to the International Student Advisor at the School/University/College you attended most recently. This form must be received before the transfer I-20 can be issued.

I, _____, grant permission
Print Student's Name

for the information requested below to be forwarded to Plymouth State University.

_____ Date _____ Student's Signature

THIS SECTION MUST BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR AT YOUR PREVIOUS SCHOOL

To the International Advisor:

The student named above is applying for transfer to Plymouth State University. Please mail your reply to The Center for Global Engagement, Plymouth State University, 17 High St., MSC 62, Plymouth NH 03264

- 1. DATE OF MOST RECENT ENROLLMENT
2. IS THIS STUDENT ELIGIBLE TO CONTINUE AT YOUR SCHOOL?
3. HAS THE STUDENT MET ALL FINANCIAL RESPONSIBILITIES TO YOUR SCHOOL?
4. TO YOUR KNOWLEDGE, HAS THE STUDENT MET ALL OBLIGATIONS TO THE IMMIGRATION AND NATURALIZATION SERVICE?
5. SEVIS TRANSFER RELEASE DATE
6. SEVIS ID
7. ANY COMMENTS YOU THINK MAY BE HELPFUL TO US.

PLYMOUTH STATE UNIVERSITY'S SEVIS SCHOOL CODE: BOS 214F00417000

SIGNATURE _____

AFFIX SEAL OR STAMP HERE

TITLE _____

NAME OF INSTITUTION _____

MAILING ADDRESS _____

TELEPHONE NUMBER _____

E-MAIL ADDRESS _____

DATE _____

COLLEGE SEAL REQUIRED