Transfer Verification Form

You have been accepted to Morrisville State College. Congratulations! Federal regulations governing students in F and J status require our office to seek verification of your enrollment status from the international student advisor of the school you were authorized to attend. Therefore, please present this letter to the international student advisor at your current school and request that it be returned to us. If you are enrolled in a U.S. high school, give this form to the office at your school that issued you your I-20 or DS-2019.

Submission of this form indicates that you have authorized the release of this information. Thank you.

___________________________________________________________

Student Name (Please print legibly) _____________________________

Date

This section is to be completed by the international student advisor at your current school.

Yes No

___ ___ The above-named student is authorized by the Department of Homeland Security to attend your school.

___ ___ The student has been entered into SEVIS by your school. Indicate SEVIS ID# here: ____________________________

___ ___ The student has been enrolled for a full-time academic load for the term for which he/she was most recently registered, which is:

Fall ______ Spring ______ Summer ______ Year ______

___ ___ The student was enrolled part-time for the term for which he/she was most recently registered, which is:

Fall ______ Spring ______ Summer ______ Year ______

Please explain the reason for part-time status ________________________________________________________________

______________________________________________________________________________________

Please list all periods of authorized Practical Training with beginning and ending dates. Specify whether curricular or optional:

<table>
<thead>
<tr>
<th>Curricular Practical Training (CPT)</th>
<th>Dates of CPT</th>
<th>Optional Practical Training (OPT)</th>
<th>Dates of OPT</th>
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The student’s current non-immigrant status is _____ (F-1) _____ (J-1)

The SEVIS release date for this student is ____________________________

(We are listed in the SEVIS transfer list as: SUNY College of Agriculture and Technology at Morrisville BUF214F10083000)

Today’s date

________________________________  __________________________________  ______________________

Title of School Official  Name of School Official  Phone # of School Official

________________________________  __________________________________

School Name  Email Address of School Official

________________________________  ____________________________  ______________________

Address  City  State/Zip Code

Please do not transfer Completed or Terminated Records. When complete, email this form to longoer@morrisville.edu or fax to the attention of Erin Longo at 315-684-6427.