Muskingum University Transfer-In

INSTRUCTIONS TO APPLICANTS IN THE U.S.: Student should complete section A of this form. If you are on an F-1 or J-1 visa, you should request the International Student Advisor or counselor at the school you currently attend or most recently attended to complete Section B. You will not be issued an I-20 or DS-2019 from Muskingum until this form is completed and returned with the documents requested. Once you are issued and I-20 or DS-2019 from Muskingum, you must report to the Office or International Enrollment within 15 days of the beginning of classes to have your transfer processed.

SECTION A: INFORMATION FURNISHED BY THE APPLICANT

<table>
<thead>
<tr>
<th>NAME (family)</th>
<th>(given)</th>
<th>(middle/maiden)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Country of Citizenship</td>
<td>Country of Legal Residence</td>
<td>SEVIS ID No.</td>
</tr>
<tr>
<td>Name of Current/Most Recent Institution</td>
<td>Dates Attended: from</td>
<td>to</td>
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I intend to enroll at Muskingum for the following Semester: 
- Fall (August) 200__
- Spring (January) 200__

I hold the following visa classification status (check one)
- F-1 Student: Attach copies of your I-94 (both sides) and all I-20’s issued to you.
- J-1 Student: Attach copies of your I-94 (both sides) and all DS-2019’s issued to you.

I hereby authorize the DSO/ARO at the U.S. institution I am currently attending/most recently attended to review the information provided by me with this form, and on the attached photocopied document(s), and to provide the additional comments requested in section B of this form.

Signature ________________________________ Date ________________

SECTION B: INTERNATIONAL STUDENT ADVISOR REPORT

INSTRUCTIONS TO THE INTERNATIONAL STUDENT ADVISOR (ISA)

Before filling out Section B, please review the information the applicant has provided in Section A against the records maintained in your office. Please answer the following questions and return the completed form to the address given at the top of this page. Thank you.

Is the information furnished in Section A (including photocopies of certificates of eligibility) complete and accurate according to records in your office? Y / N (IF NO, please comment)

To the best of your knowledge, is this student currently in valid non-immigrant status in the category listed above? Y / N

Has the student ever been reinstated to status? Y / N If yes, please indicate the date the reinstatement was approved:

If the applicant is in F-1 status, please indicate from your records his/her:
First day of F-1 status ____________ Dates attended at your institution: From ____________ To ____________

Practical Training authorized by your institution (Please indicate type and specific dates):

______________________________

Is the student eligible to return to your school? Y / N If not, why not?

SEVIS Transfer-Out Date: ____________

Name and Title of ISA ____________________________
Institution ____________________________
Address ____________________________
Telephone ( ) ____________________________ Fax ( ) ____________________________

Signature ________________________________ Date ________________