

International Transfer Approval Form

This form is required of all International students who are applying for transfer to Delta College and must be completed by the applicant and the school they are transferring from.

SECTION A • TO BE COMPLETED BY THE APPLICANT

Please type or print clearly. Please sign prior to delivering to your home institution. Your signature releases your educational records to Delta College. You must still request your transcripts be sent by the bursar or registrar.

Name (as it appears on your passport) _____
Last (family name/surname) First (given name) Middle Name/s

Student Number (for institution below) _____ Signature _____

SECTION A • TO BE COMPLETED BY AN INTERNATIONAL STUDENT ADVISOR

Advisor Name _____ Advisor Title _____

Institution Name _____ Advisor Phone Number (____) _____

Address of Institution _____

Visa Information

F-1 Admissions Number (from I-94) _____

SEVIS ID# _____

Date of initial entry into U.S. _____ MM/DD/YYYY

I-94 valid until _____ MM/DD/YYYY

Did your institution create an I-20 for this student? Yes No, please explain _____

Is the Student Currently "In-Status"? Yes No, please explain _____

Other Information

Was the student ever on academic probation? Yes No

Was disciplinary action ever taken against the student? Yes No

Is the student academically eligible to continue at your institution? Yes No

Has the student met all financial commitments to your institution? Yes No

Advisor Signature _____ Date _____

Please complete and return with copies of all pertinent educational records to:
Delta College, Admissions, 1961 Delta Road (D-121) University Center, MI 48710 USA
(989) 686-9093 • admit@delta.edu

