

# 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 (H-Wing) University Center, MI 48710  
USA (989) 686-9093 • admissions@delta.edu