



### SEVIS Transfer Release Form

Dear Prospective Student:

To process a request for an I-20 form and complete your admission to College of the Mainland, we must receive an International Student Advisor's Report completed by your current institution. The completed form must be mailed or faxed.

I authorize and request that the information requested below to be released to College of the Mainland.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Student I.D. Number \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Semester intended to transfer to College of the Mainland

Fall  Spring  Summer Year \_\_\_\_\_

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Dear Designated School Official:

1. How long has the student been enrolled at your institution? \_\_\_\_\_  
From \_\_\_\_\_ Until \_\_\_\_\_
2. Students major program of studies \_\_\_\_\_
3. Has the student met all financial obligations to your institution? Yes \_\_\_\_ No \_\_\_\_
4. Is the student currently in legal status with immigration? Yes \_\_\_\_ No \_\_\_\_
5. Could student return to your institution Yes \_\_\_\_ No \_\_\_\_  
If not, why not? \_\_\_\_\_
6. Any authorized reduction in student's course load (i.e. medical, academic difficulties):  
\_\_\_\_\_
7. Additional comments or information which you feel would be helpful would be appreciated. Thank you. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SEVIS # \_\_\_\_\_ Date Released \_\_\_\_\_

Name of Institution \_\_\_\_\_ Signature of School Official \_\_\_\_\_

Date \_\_\_\_\_ Telephone \_\_\_\_\_ Name (Please Print) \_\_\_\_\_