

ACADEMIC/USCIS STANDING

	Please Note: This i	s NOT a SEVIS Rel	ease.
This portion to be filled ou	t by the student:		
Student Name:		First	
SEVIS	Number:		ad Semester of Transfer:
I give permission to my pres	sent school to release the inf	formation requested on this	s form.
Student Signature		Date	
Is on academic probation	ling with USCIS.	Cumulative GPA: on. nissal (Select all that ap	oply.)
Students who are out of stat	us or on suspension / dismis	sal may not be eligible to t	ransfer.
Signature of DSO	Name and	l Title of DSO	Date
Name and Address of Institu	ition		
Phone	Fax		nail

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