

TRANSFER IN AUTHORIZATION FORM

Student's Name: _____

Home Address: _____

Term: Fall 20____ Spring 20____ Summer 20____

I waive the right to view the information on this form. I also permit the information requested below to be forwarded to Prairie State College.

Student's Signature: _____ Date: _____

To: International Student Advisor or DSO

Above student has applied for admission to Prairie State College. In compliance with USCIS regulations, it is requested that you confirm the above-name student's status at your institution before approving transfer to this school. **PSC SEVIS ID# CH1214F00263000.**

1. Student's visa type _____ SEVIS ID# _____

SEVIS release date: _____

2. What term did this student complete last at your institution?
3. Is this student in good standing and maintained his/her non-immigrant status?
4. What is the last USCIS-authorization date for completion of studies in the student's current program?
5. Has the student met all financial responsibilities to you institution?
6. Comments:

DSO Name: _____ Title: _____ Phone#: _____

Institution: _____ Signature: _____

Please do not release this Student's I-20 in SEVIS until you get confirmation that he/she has been admitted to PSC.
Please return this form to: International Student Advisor, Prairie State College, 202 S. Halsted St., Chicago Heights, IL 60411
Telephone: (708) 709-7809 / Fax: (708) 709-3915