

Transfer Verification Form

Congratulations on your admission to SUNY Morrisville! Federal regulations governing students in F and J status require we verify your enrollment status from the school you were last authorized to attend. Please have the International Student Advisor at your current school complete and return this form within 2 weeks of receiving it. If you are enrolled in a U.S. high school, give this form to the office at your school that issued your I-20.

Section 1: Your signature below indicates that you have authorized the release of your student information.

Printed Name	Signature	Date	
Section 2: To be completed by the Int	ernational Student Ad	visor at your current school.	
The student was enter The student was enro Fall Spring The student was enro Fall Spring Fall Spring	red into SEVIS by your illed for a full-time aca g Summer illed part-time for the g Summer	the Department of Homeland Sec school. SEVIS ID: demic load for the term they wer Year term they were most recently reg Year us:	e most recently registered:
List all periods of authorized Practical			
Curricular Practical Training (CPT)	Dates of CPT	Optional Practical Training (O	PT) Dates of OPT
The student's current non-immigrant The SEVIS release date for this studen SEVIS name and code: SUNY (t is	Please provide a copy of the st	
Name and Title of School Official (plea	School Name	2	
Address		Phone	
Email	Signature		Date
Please return via email to admi	ssions@morrisville.ed	<u>u</u> or fax to 315-684-6427 to the a	ittention of the PDSO.
DEVYN TH	OMAS, TRANSFER & IN	FERNATIONAL COORDINATOR, PDSO	
SECOND F	LOOR WHIPPLE ADMINI	STRATION BUILDING • 315.684.6276	
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