

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.

Printed Name		Signature	Date	Date	
<u>Sectio</u>	on 2: To be completed by the In	ernational Student Ac	lvisor at your current school.		
Yes	The student was enter The student was enter Fall Spring The student was enro Fall Spring Please explain the re-	The above-named student is authorized by the Department of Homeland Security to attend your school. The student was entered into SEVIS by your school. SEVIS ID: The student was enrolled for a full-time academic load for the term they were most recently registered. Fall Spring Summer Year The student was enrolled part-time for the term they were most recently registered: Fall Spring Summer Year Please explain the reason for part-time status: Please explain the reason for part-time status please please explain the reason for part-time status please ple			
List all periods of authorized Practical T Curricular Practical Training (CPT)		Training with beginning Dates of CPT			
The st	tudent's current non-immigrant	status is:	(F-1) (J-1)		
	EVIS release date for this studer	nt is	Please provide a copy of the student		
The S	SEVIS name and code: SUNY	College of Agricultui	e and Technology at Morrisville BU	12141 10003000	
The S	SEVIS name and code: SUNY		e and Technology at Morrisville BU School Name		
The S	e and Title of School Official (ple				