

School Transfer Form

Student, please complete Part I of this form and submit it to the International Student Advisor at the U.S. school in which you are currently enrolled, or the U.S. school you most recently attended.

Transfer Eligibility: 1. Remain in status until the actual date of transfer; 2. Begin studies at Iowa Western at next available semester or within five months following the release date, whichever is sooner.

PART I (To be completed by applicant.)

Name of Student:							
	Last/Surname Name		First/Given Name	Middl	le Initial		
Country of Citizenship:							
United States Address:							
	Street	City	State	Postal Code			
l,	, authorize release of all information on this form. Date:						
Student's Signature					M/D/Y		

<u>PART II</u> (*To be completed by the International Student Advisor or other Designated School Official.*) Please return this form directly to IWCC. This form may be faxed (712.388.6803) or emailed (<u>international@iwcc.edu</u>). School address is below. THIS FORM SHOULD NOT BE RETURNED TO THE STUDENT. For Transfer purposes, IWCC's (Council Bluffs Campus) current School Code is OMA214F00331000.

Does this student have a SEVIS Form I-20 from your school? \square YES	□ NO							
Is the record "Active" and eligible for transfer?								
When was this student last enrolled full time at your institution?								
Has this student been granted an RCL for Academic Difficulty?								
If yes, please indicate which academic level it was for (e.g., ESL, Certifi								
Other comments:								
Print Name of School Official	Name of Institution							
Signature of School Official	City	State	Postal Code					
Official Title of School Official	E-mail Address							
Return this form with required documenta	Interna 2700 Co	estern Community College tional Student Services Jlege Road Bluffs, IA 51503						