



# International Student Transfer Information

Complete ONLY if you are transferring from another U.S. college or university to Allen Community College.

### Part 1: To be completed by the student

Name of Student \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Family Name / First Name Month/Day/Year

Social Security Number or present school ID number: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

Name and Address of School attended: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby authorize a school official to provide the information requested.  
Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

### Part II: To be completed by the International Student Advisor

The international student whose name and identification appear above has requested admission to Allen Community College. To complete the transfer procedure, the Department of Homeland Security requires our office verify that this student was in valid F-1 status at your school in the term preceding the transfer or preceding an authorized vacation. Please complete the information below and mail this form to:

International Student Admissions  
Allen Community College  
1801 N Cottonwood  
Iola, KS 66749  
620-365-3284

or faxed to

1. When was this student first enrolled at your school? \_\_\_\_\_
2. When was this student last enrolled at your school? \_\_\_\_\_
3. Immigration Admission # (F-1): \_\_\_\_\_
4. To the best of your knowledge, is this student in F-1 status? (Check one) Yes No

Comments/concerns: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Advisor's Name (please print): \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: (620) 365-5116 | Fax: (620) 365-3284