# International Student Transfer Eligibility Form

## Student:

Please complete the top portion of this form then take it to the International Student Advisor at the school you are currently attending for verification and signature. **We are not asking for your SEVIS record to be transferred at this time.** This form provides the contact details for your advisor, your last date of classes and if you are eligible for transfer from an immigration perspective. If you have questions, please call 406.243.5844 or e-mail international.admissions@mso.umt.edu

<table>
<thead>
<tr>
<th>Name</th>
<th>(Family/surname as it appears in passport)</th>
<th>(First/given)</th>
<th>(Middle)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birthdate (mm/dd/yyyy)</td>
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<tr>
<td>City and country of birth</td>
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<tr>
<td>Telephone</td>
<td></td>
<td>Current E-mail</td>
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</tbody>
</table>

I hereby give my permission for _____________________________ to release the following information to University of Montana. (Name of school currently attending)

## International Student Advisor or DSO:

The above named student has applied for admissions to University of Montana. Please complete the following information for the above student and return this form back to:

University of Montana, International Admissions, 105 International Center Missoula, MT 59812
Fax 406.243.6194 – international.admissions@mso.umt.edu Thank you for your assistance!

### Student Visa Classification/Status:

- □ F-1
- □ J-1

### Current I-20/DS2019 Expiration Date

Transfer Release Date (please choose):

- □ Upon proof of Acceptance to UM
- □ Specific date (please specify) ___/___/____

- □ Yes □ No The student is in good standing and is eligible for transfer to University of Montana

- □ Yes □ No The student is currently enrolled. If no, what is the last date of attendance ___/___/____

### Signature of School Official:

Date: ________________________

### Name of School Official:

Telephone: ________________________

### E-mail:

______________________________

### Name of school:

______________________________

### Name and address of School: _____________________________