

Southern Arkansas University Tech

International Student Services

International Student Transfer Questionnaire

Instructions: An International student who is in the U.S. and wants to transfer to SAU Tech must complete Section I of this form. The Designated School Official (DSO) at the student's current school must complete section II of this form.

I. TO BE COMPLETED BY THE STUDENT:

Name: _____

Country of Citizenship: _____ Semester of Intended Enrollment: _____

Do you plan to travel outside the U.S. before arriving at SAU Tech? ___ Yes ___ No
(Note: If you choose to return to the U.S. on SAU Tech's I-20, you will not be able to return until 30 days before the program list date on the I-20.)

I authorize the release of information requested to SAU Tech by signing below

Student Signature: _____ Date: _____

II. TO BE COMPLETED BY DESIGNATED SCHOOL OFFICIAL:

Please Transfer the Record upon receiving an acceptance letter from SAU Tech.
Camden (NOL214F10199000)

SEVIS#: N_____ Date of Latest Attendance: _____

___ Attendance letter required or SEVIS Release Date: _____

Is the student currently on OPT? ___ Yes ___ No If yes, what was start date: _____

Has the student encountered financial problems at your institution? ___ Yes ___ No

If yes, please describe: _____

Is the student eligible to return or continue at your institution?

Academic: ___ Yes ___ No Conduct: ___ Yes ___ No

Has the student maintained immigration status while at your institution? ___ Yes ___ No

(Signature) (Date)

Name: _____

Phone Number: _____ Email: _____

Institution: - _____

Address: - _____

Please return form to: dmcleane@sautech.edu

Fax number: 870-574-4478

