

F-1 TRANSFER IN FORM

Complete this form if you are attending another educational institution in the U.S. in F-1 status and provide a copy of your current I-20 and Form I-94. Please ask a Designated School Official (DSO) at your school to complete the bottom part of the form then send it to Northwood University's Office of Admissions.

THIS SECTION TO BE COMPLETED BY STUDENT

I intend to transfer to North	wood University for the follo	wing semester:			
YEAR:	🗆 FALL	SPRING		SUMMER	
ACADEMIC LEVEL:	□ INTENSIVE ENGLISH	□ BACHELOR		MASTER	
NAME:		DATE 0	OF BIRTH:	MONTH/DAY/Y	EAR
ADDRESS:					
PHONE NUMBER:		EMAIL ADDRESS:			
I authorize a Designated School Official at my current institution to complete and return this form to NU.					
SIGNATURE: DATE:			DATE:	MONTH/DAY/YEAR	
THIS SECTION TO BE COMPLETED BY THE DESIGNATED SCHOOL OFFICIAL (DSO)					
RELEASE TO NORTHWOOD U	SE TO NORTHWOOD UNIVERSITY - MIDLAND, MICHIGAN SEVIS SCHOOL CODE		HOOL CODE:	DET214F00450000	
SEVIS ID NUMBER:		TRANSFER RELEA	SE DATE:	MONTH/DAY/Y	EAR
START DATE OF ATTENDANCE:	MONTH/DAY/YEAR	LAST DATE OF ATTENDANCE:		EAR	
Has the student maintained F-1 status under USCIS regulations? If no, has a reinstatement been filed? Has the student been authorized for a Reduced Course Load, CPT or OPT? If yes, please indicate the type(s), full/part-time, degree level, and authorization date(s):				□ YES □ YES □ YES	□ NO □ NO □ NO
ir yes, please indicate the ty	pe(s), fuil/part-time, degree	level, and authorizati	ion date(s):		
NAME OF DESIGNATED SCHOOL OF	FICIAL:				
TITLE:					
PHONE NUMBER:		EMAIL ADDRESS:			
SCHOOL NAME AND ADDRESS:					
SIGNATURE:		DATE:			