

## INTERNATIONAL TRANSFER VERIFICATION FORM

### SECTION 1: TO BE FILLED OUT BY THE STUDENT (PRINT CLEARLY)

If you are currently enrolled in, or recently graduated from a college or university in the United States, you must complete Part 1 of this form to be considered for transfer to Joliet Junior College. The International Student Advisor (DSO) at your current institution should complete Section 2 and return it directly to Joliet Junior College. Please Note: **The student transfer IS NOT approved until this form has been completed and the student has been formally notified of acceptance by letter.**

Last Name (Family): \_\_\_\_\_ First Name (Given): \_\_\_\_\_

Date of Birth: (MM/DD/YYYY) \_\_\_\_\_ Phone: \_\_\_\_\_

Social Security Number (if applicable) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ SEVIS ID#: N \_\_\_\_\_

Email: \_\_\_\_\_ @ \_\_\_\_\_ Current School Name: \_\_\_\_\_

I intend my first semester at Joliet Junior College to be: SPRING (January) \_\_\_\_\_ FALL (August) \_\_\_\_\_ SUMMER (May) \_\_\_\_\_ YEAR \_\_\_\_\_

***By signing below, I authorize the international student advisor at the school named above to release the requested information to Joliet Junior College.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### SECTION 2: THIS SECTION IS TO BE COMPLETED BY THE INTERNATIONAL ADVISOR/DSO AT YOUR CURRENT SCHOOL

The student named above has notified us of his/her intent to transfer to Joliet Junior College. Please complete the following and return to the JJC International Admissions Office.

1. WAS THE STUDENT PURSUING A FULL COURSE OF STUDY AT YOUR COLLEGE? YES OR NO

DATES OF ATTENDANCE: From: \_\_\_\_\_ To: \_\_\_\_\_

2. TO THE BEST OF YOUR KNOWLEDGE, IS THE STUDENT IN LEGAL F-1 STANDING AND ELIGIBLE FOR TRANSFER? YES OR NO

IF NO, PLEASE EXPLAIN: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. PLEASE LIST ALL BEGINNING AND ENDING DATES OF ALL PRACTICAL TRAINING (CPT/OPT) AS WELL AS ANY AUTHORIZED REDUCED COURSE LOAD (RCL) ISSUED PRIOR TO THIS TRANSFER.

CPT: \_\_\_\_\_

OPT: \_\_\_\_\_

RCL: \_\_\_\_\_

4. ADDITIONAL COMMENTS: \_\_\_\_\_

5. SUGGESTED DATE OF TRANSFER RELEASE IN SEVIS: \_\_\_\_\_ STUDENT SEVIS ID# \_\_\_\_\_

NAME AND TITLE OF PDSO/DSO: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

COLLEGE NAME AND ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

**DSO: Mail or fax completed form to Joliet Junior College • International Admissions • 1215 Houbolt Road • Joliet IL, 60431  
Phone (815) 280-2870 • Fax (815) 280-6788 SEVIS School Code: CHI214F10830000**