



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

Name _____
(Family/surname as it appears in passport) (First/given) (Middle)

Birthdate (mm/dd/yyyy) _____ City and country of birth _____

Telephone _____ Current E-mail _____

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: _____