

International Student Transfer Clearance Form For Students Transferring To Newman University

Section 1: To be completed by student

Name of Student _____ Date of Birth _____

Current address _____

Telephone number _____

Email address _____

Name of current or previous institution _____

I authorize the release of all necessary transfer documentation by the International Student Advisor for the purpose of the transfer of schools.

Signature of Student _____ Date _____

Section 2: To be completed by the International Student Advisor at your current school

SEVIS Number _____

Student is currently:

_____ **In Status** and is eligible to transfer.

_____ **Out of Status** and should apply for Reinstatement.

_____ **Out of Status** but applied for Reinstatement on _____.

Dates of attendance _____

Periods of Authorized Employment: (CPT/OPT/ Severe Economic Hardship) _____

Date of release for transfer _____

Name and Address of School _____

Name of DSO _____ Title _____

Signature _____ Date _____

Telephone _____ Email _____

**Please return to: International Student Office
Newman University
3100 McCormick Avenue
Wichita, KS 67213-2097**