



Transfer-In Notification Form

(Midland College: SEVIS Code - ELP214F00112000)

Please complete Section I of this form and have Section II completed by the International Student Advisor at the school you currently attend or have previously attended. Please call the MC International Office at 432-685-5523 with any questions.

I – PERSONAL INFORMATION AND STUDENT SIGNATURE *(to be completed by the applicant)*

Last or Family Name: _____ First or Given Name: _____

Address: _____

MC ID: _____ Email: _____

Semester/Year you will begin study at MC: Fall _____ Spring _____ Year: _____

“I give permission for any personal and academic information to be released to MC”

Signature of Student: _____ Date: _____

ATTENTION STUDENT AUTHORIZED FOR OPTIONAL PRACTICAL TRAINING:

Please be aware that transferring your SEVIS record during a period of authorized Optional Practical Training (OPT) will cancel your employment authorization as of the SEVIS release date (the date that the release of your SEVIS record by your previous school become effective). If you are authorized for OPT and wish to use any OPT that will occur prior to your start date at MC, please request that your previous school use a release date that occurs after completion of your OPT, but prior to your scheduled start date at MC.

II – TRANSFER OUT INSTITUTION *(to be completed by the International Student Advisor (DSO) at the student's current/previous institution/college)*

The above-name student has been admitted to MC. In accordance with pertinent immigration regulations, we request that you confirm his/her status at your institution so that we may process a transfer to SEVIS.

The above-named student: _____ currently attends _____ last attended _____ never attended

Name of Institution: _____

From (month/day/year): _____ To (month/day/year): _____

What is the student's nonimmigrant status? _____ Is the student eligible for transfer? _____ Yes _____ No

Has the student been authorized for Optional Practical or Academic Training? _____ Yes _____ No

If yes, please list which type and the dates authorized: _____

SEVIS ID Number: _____ Expected SEVIS Transfer Release Date (MM/DD/YYYY): _____

Comments: _____ (please use back if needed).

International Student Advisor Signature: _____

International Student Advisor Name (printed): _____

Telephone Number: _____

Email: _____ Date: _____

Please return form mail or email to: MC International Office, 3600 N Garfield, Midland, Texas 79705 or jmartinez@midland.edu

***This is not a letter of acceptance. It is a check of the student's status.**