



Graduate School

Form I-20 Transfer Application

Visa Clearance Form for International Transfer Students

Please sign the release of information on this form and give it to your designated school official at the school you now attend or most recently attended.

I grant permission for the information below to be released to Hood College.

Applicant's Signature _____ Date _____

Name of Student (Please print): _____

Semester of Entry: Spring Summer Fall Year: _____

To DHS Designated School Official (Items 1-3 below and DSO signature must be completed.)

The above-named student has been admitted to Hood College. In compliance with DHS regulations, we request confirmation of her/his status at your institution. Please complete the following and return via fax 301-696-3597 or email gofurther@hood.edu. Our name in SEVIS is: "Hood College" and the school code is: BAL 214F00012000

1. Current Immigration Status: (Select one)

Visa Type:

I-20 or IAP-66: Completion Date on Document _____ I-94 Expiration Date _____

Exchange-Visitor Program _____ Category _____

Status:

The student is in good standing and has been pursuing a full course of study (or has been reinstated by DHS).

The student is out of status and a reinstatement to the student status was filed on _____ at DHS (District _____) and is pending. (Enclose copies of documents filed with DHS).

The student is out of status, and we will advise her/him to apply for reinstatement upon receipt of a new I-20 from Hood College.

Other _____

2. Release date of the student's SEVIS record: _____

3. Please indicate the dates of any practical training (curricular, optional, academic) in which the student participated.

Curricular _____ Optional _____ J-1 Academic _____

Name and Title of Designated School Official Completing this Form.

Signature: _____ Print Name: _____

Institution: _____ Phone: _____ Email: _____