SCHOOL TRANSFER NOTIFICATION OF STATUS
For (International Student) F-1 Visa holders

Name: _____ Student ID Number_____

Last Semester Attended: _____

TO BE COMPLETED BY THE DESIGNATED SCHOOL OFFICIAL:

_____ _____
Name of Designated School Official Signature of Designated School Official Date

_____ _____
Name of Institution Address of Institution

_____ _____
Telephone Number E-Mail Address

PLACE SEAL / STAMP HERE

The student named above has applied for admission to Cochise College in Douglas, Arizona as a transfer student from your institution. We would appreciate your assistance in certifying his/her eligibility to transfer. Please complete the information below and fax this form to our office (1-520-417-4192) at your earliest convenience. Thank you.

Date when student will be released by current school: _____

INS Admissions Number: _____

_____ Student is currently attending classes. Semester _____ Year _____

_____ Student is **OUT OF STATUS** by failure to enroll in a minimum of 12 credit hours as required for an F-1 Student.

_____ Student is **IN STATUS** during his/her time of studies at our school.

_____ Other / Comments / Attachments

_____

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