



Transfer Student Verification

Personal Information: To be completed by applicant and given to the current International Student Advisor to respond to remaining portion below.

Name: _____ Home Country: _____
(Family/Last) (First) (Middle)

Address in Home Country: _____

Address in United States: _____

Place of Birth: _____ School Term Applying for: _____

Authorization: To be completed by applicant.

I am applying for admission to Mesa State College. I authorize you to provide to Mesa State College the information requested below.

Signature: _____ Date: _____

Please give the remaining portion to your International Student Advisor at your present school and ask him/her to return this form to us.

To International Advisor: This student is applying for admission to Mesa State College. We need the information concerning this student's status before we can act upon his or her application. Please complete the rest of this form and mail or fax it to:

Jared Meier, International Admissions
Mesa State College
1100 North Avenue
Grand Junction, Colorado 81501
Fax: (970) 248-1973

Immigration Information:

Immigration Admission Number: _____ Visa Type: _____ SEVIS Number: _____

School Issuing I-20 used to obtain entry into the U.S.: _____

Date current stay expires (As shown on form I-94): _____

Is this student authorized by INS to attend your institution? YES _____ NO _____

If "NO," please explain: _____

Is this student currently enrolled at your institution? YES _____ NO _____ SEVIS Release Date: _____

Other Information:

International Student Advisor's opinion of:

English Proficiency: EXCELLENT _____ GOOD _____ AVERAGE _____ BELOW AVERAGE _____

English Proficiency Test: _____ Score _____

Is the applicant in good standing and eligible to return to or continue at your institution?

Academically: YES _____ NO _____ Conduct: YES _____ NO _____

Comments: _____

Has the student experienced financial difficulties while at your institution? YES _____ NO _____

If "YES", please describe _____

Are you aware of any problems of adjustment that may cause difficulty after transfer? _____

Signature: _____ Date: _____ Institution: _____

Address: _____ Telephone: _____ Fax: _____

Thank you for your time!