

# International Student Transfer-In Form

The information below is required before your transfer to WSU can be completed. "Transfer" applies to students who plan to transfer from a U.S. college, university or high school.

## To be completed by STUDENT

WSU Campus (please check one)			
<input type="checkbox"/> Pullman (main campus)	<input type="checkbox"/> Spokane	<input type="checkbox"/> Tri-Cities	<input type="checkbox"/> Vancouver
Last Name		First Name	
Student ID# at the Previous/Current U.S. School		WSU ID# (if known)	
First Academic Term at WSU		E-mail	
I authorize my previous/current school to provide WSU with the information below. It is my intention to transfer to WSU.			
Signature:		Date:	

## To be completed by the International Student Advisor at the previous/current U.S. school

- Based on the records of this office, it appears that the above named student:
 

<input type="checkbox"/> is	<input type="checkbox"/> is/was
<input type="checkbox"/> is not "maintaining status" AND	<input type="checkbox"/> is not/was not "pursuing a full course of study"
- The student's **last date of attendance** at this school was (or is): \_\_\_\_ / \_\_\_\_ / \_\_\_\_ under  F-1 status  J-1 status
- List all periods and reasons for **Reduced Course Load** the student was previously authorized for.  
 \_\_\_\_\_  
 \_\_\_\_\_
- List all periods of previously authorized employment the student engaged in **Optional** and/or **Curricular Practical Training**.  
 \_\_\_\_\_  
 \_\_\_\_\_
- If the student is in SEVIS, please provide the following information.  
 Student's **Transfer Release Date** in SEVIS: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Student's SEVIS ID # \_\_\_\_\_

School Official's Name	Title
Signature	Date
E-mail	Phone
School Name and Address	

Please mail or fax the completed form to:  
 Office of Student Affairs  
 Washington State University Spokane • PO Box 1495 • Spokane WA 99210-1495  
 Phone: 509-358-7534 • Fax: 509-358-7538 • E-mail: weste@wsu.edu