



UNIVERSITY OF
SOUTHERN MAINE

The Immigration and Naturalization Service requires this office to have the following information in order to process your transfer to the University of Southern Maine. Please complete the information in Section I and submit this form to the International Student Advisor at your present school. Please attach a copy of your current I-20.

Section I (to be completed by the student)

Applicant's Name: _____
(print) (Family Name) (First Name) (Middle Name)

Birth date: ___/___/___ Social Security Number: _____ Country: _____

Semester intended to transfer: Fall _____ Spring _____ Summer _____ 20 _____

I hereby authorize my present International Student Advisor (or equivalent campus officer) to provide the information below as part of my application for admission to the University of Southern Maine.

Date: _____ Signature: _____

Section II (to be completed by International Student Advisor) Please return this form to the address below. Thank you.

Student INS Admissions Number _____

_____ This student is in good standing and is enrolled in a full course of study.

_____ This student is out of status and a reinstatement to student status was filed on (date) _____ at the INS office in (place) _____, and is pending. Please enclose copies of the documents filed with INS.

_____ This student is out of status and must file for reinstatement to student status.

_____ This student is in Optional Practical Training. Beginning date _____ Ending Date _____

_____ This student transferred to you from another institution in the United States.

_____ **On what date will the student's SEVIS record be transferred to USM POM 214F00085000**

Other comments: _____

Signature: _____ Name of DSO: _____

Date: _____ Title: _____

School name, address, and phone: _____

University of Southern Maine, **POM 214F00085000**, Office of International Exchange
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(207) 780-4959