

## **Transfer Status Form**

## for transfer F-1 students applying to Butler Community College, Ks (KAN214F00071000)

F-1 Students in the U.S. who are applying to transfer to Butler Community College must complete the transfer procedure through SEVIS. In order to be admitted to Butler, the following information must be provided.

## Transfer Procedure

1. Complete Section 1 of this form

DSO Signature:

- 2. Have an International Advisor (DSO) at your current school complete Section 2
- 3. Return the completed form along with other required documents for admission to Butler
- 4. Upon admission, Butler will provide an acceptance letter to your current school
- 5. Additional documents may be required by your current school to release your SEVIS record

## SECTION 1 - To be completed by the international student

Last/Family Name	First Name
Date of Birth / / (mm/dd/yyyy)	ID# at current school:
SEVIS ID #	
Will you travel out of the US between attendance at the to	wo schools? □ Yes □ No
If yes, dates of travel: from / /	_ (mm/dd/yyyy) to / (mm/dd/yyyy)
I authorize the release of information requested on this for College.	orm for the purpose of admission to Butler Community
Student signature	
SECTION 2 - To be completed by current international advisor (DSO)	
Please check one box below and complete all appropriate blank	ks. Return the completed form to international@butlercc.edu.
*Please do not release the student's SEVIS record until proof of admission is received*	
□ The student is <b>In Status</b> according to F-1 regulations	
Last semester student was enrolled	
Did the student receive approval for a reduced c	ourse load?YesNo
If yes, reason:AcademicMe	edical
Program level and dates of approval	
Did student receive any practical training?	ſesNo
If yes, type:Full-time Curricular	Part-time OptionalFull-time Optional
If yes, program level and dates	
The student is <b>Out of Status</b> , but still wishes to attend	Butler.
□ The student is <b>Out of Status and not currently in SE</b>	VIS, but still wishes to attend Butler.
As DSO completing this form, I verify the information abo	ve is accurate to the best of my knowledge.
DSO Name:	Title:
Name of School:	Address:
Phone:	_ E-mail:

Please return completed form to: international@butlercc.edu or Fax: 316.323.6852

International Office, Butler Community College, 901 S. Haverhill Rd, El Dorado, KS 67042 
Phone: 316.322.3230
Revised 2/17

\_\_\_\_\_ Date \_\_\_\_