

TRANSFER ELIGIBILITY FORM

FOR INTERNATIONAL STUDENTS CURRENTLY ATTENDING OTHER U.S. ACADEMIC INSTITUTIONS. To complete and fax this form to the Admissions Office.

Information that is contained on this form will be used to determine your eligibility to transfer to Sierra College.

Applicant's Name: _____
LAST (Family) FIRST MIDDLE

Expected Semester & Year you will transfer to Sierra College: SPRING SUMMER

The above named international student is applying for admissions to Sierra College. Information that is contained on this form will be used to determine the student's eligibility to transfer to Sierra College. Please complete the form below and return it as soon as possible to:

SIERRA COLLEGE
ADMISSIONS AND RECORDS
5100 SIERRA COLLEGE BLVD
ROCKLIN, CA 95677

PHONE: (916) 660-7330
FAX: (916) 630-4500
Email: internationalstudents@sierracollege.edu

SEVIS ID Number: _____

Dates of attendance at your institution: _____ to _____ Date for completion of studies: _____

End of current semester student is attending: _____ (as shown on I-20)

Is the student in good standing and eligible to return/continue at your institution? Yes No

During the student's most recent term of enrollment at your institution, did they complete a full course of study?

Yes No; please explain: _____