

**Transfer Form and Required Supplemental Information for  
Applicants in the United States on Nonimmigrant Visas**

**Instructions to Applicants in the U.S.:** All students should complete Part I of this form. If you hold an F-1 visa, you should request your International Student Advisor at the school you are currently attending or have most recently attended to complete Part II.

**Part I. Information Furnished by the Applicant**

**Personal Information**

Full Name \_\_\_\_\_  
Last First Middle

Address in Home Country \_\_\_\_\_  
Street and Number Town or City Province/Territory Country

Address in U.S. \_\_\_\_\_  
Address City State Postal Code

E-Mail Address \_\_\_\_\_

Country of Birth \_\_\_\_\_ Country of Citizenship \_\_\_\_\_ Sex \_\_\_\_\_  
Male/Female

Date of Birth \_\_\_\_\_ Marital Status \_\_\_\_\_ If Married, will Spouse Accompany Applicant? \_\_\_\_\_  
(mm/dd/yy) yes/no

**Admission Data**

Campus you plan to attend: \_\_\_\_\_ East Grand Forks \_\_\_\_\_ Thief River Falls

Term and Year you plan to attend: \_\_\_\_\_ Fall (August \_\_\_\_\_) \_\_\_\_\_ Spring (January \_\_\_\_\_) \_\_\_\_\_ Summer (May \_\_\_\_\_)

Intended Major \_\_\_\_\_ Degree \_\_\_\_\_ Diploma \_\_\_\_\_ Certificate

Most Recent U.S. Institution Attended \_\_\_\_\_

Dates of Attendance \_\_\_\_\_

Visa Classification you hold now \_\_\_\_\_

- **Attach copies of the following documents: I-94 both sides and all I-20's issued to you.**

**Student Authorization:**

I hereby authorize the international student advisor at the U.S. institution I have most recently attended to review the information provided above and on the attached photocopies of documents and to provide the additional comments requested in Part II of this form.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Part II. Must Be Completed by Student's Advisor**

Ask your current International Student Advisor to complete Part II (Below) and return it to you. For any questions, please call the NCTC International Student Advisor 800-959-6282.

This form must be completed by F-1 students who currently reside in the United States and intend to transfer to Northland Community & Technical College. (**SEVIS School Codes** – Thief River Falls: SPM214F00437000, East Grand Forks: SPM214F00437001)

**Student's Full Name**

\_\_\_\_\_

Last	First	Middle
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1. List the term/year of this student's most recent full-time enrollment at your institution: \_\_\_\_\_

2. To the best of your knowledge, is this student currently in F-1 status?  Yes  No

(If no, please explain) \_\_\_\_\_

3. Has this student been granted curricular or optional practical training?  Yes  No

If yes, please explain: \_\_\_\_\_

Type and period(s) authorized: \_\_\_\_\_

4. Would the student be permitted to continue with or return to your institution?  Yes  No

If no, please explain: \_\_\_\_\_

5. Has this student experienced any difficulties in any of the following areas?  
 Health  Finances  English  Academics

If yes, please explain: \_\_\_\_\_

**Verification of International Student Advisor**

\_\_\_\_\_  
Signature Name (Print) Date

\_\_\_\_\_  
Name of Institution/SEVIS School Code Institution Address

\_\_\_\_\_  
Telephone Number E-Mail Address

**Return this form:** [admissions@northlandcollege.edu](mailto:admissions@northlandcollege.edu)

7/25/2019 nkc

Northland is an equal opportunity educator and employer. This document is available in alternative formats to individuals with disabilities by contacting ASC Director at 1-800-959-6282 or TTY 1-800-627-3529.