

TRANSFER ELIGIBILITY FORM



Student: We must have the following information before we can issue an **I-20** for the **F-1 Non-Immigrant Status** to transfer to Life University. Please ask the International Advisor at your current institution to complete this form and submit for processing to the Enrollment Office at Life University.

Please print or type.

Student Last Name _____ First Name _____ Middle Initial _____

Mailing Address _____

City _____ State _____ Zip _____

I grant authorization to have my information released to Life University for Admissions Acceptance.

Student Signature _____ Date _____

International Student Services Department: The student listed above has applied for admission to Life University. At this time, we are asking that you verify the above student's Immigration Status as soon as possible. If accepted, Life University will contact your office to request that the student's SEVIS Record be transferred to our office.

Is the student currently enrolled full-time? _____

If not, please explain and give last attendance date _____

Has the student met all financial obligations? Yes No

Is the student in status with INS? Yes No

Please specify level and field of study _____

Please describe any periods of off-campus employment _____

D SO Name _____ Title _____

Institution/Address _____

Telephone _____ Fax _____

Email _____

D SO Signature _____ Date _____

Please complete this form and mail it to Life University Office of Enrollment, 1269 Barclay Circle, Marietta, GA 30060; or fax to 770-426-2895.