

# Transfer Eligibility Form

All International students currently attending an educational institution within the United States, with an F or J visa and are requesting to transfer to CGCC, must have this form completed and received by the International Education Program office in room SC-165. Please ask your current International Student Advisor or Designated School Official (DSO) to complete this form. **IMPORTANT:** an I-20 will not be issued by this institution until the Transfer Eligibility Form is completely filled and returned to International Education Programs at CGCC. **Complete the top portion before submitted to the DSO in your current institution.**

## TO BE COMPLETED BY THE STUDENT

Name of Student \_\_\_\_\_  
(Family Name / Surname) (Given Name / First Name) (Middle Name)

Current Address \_\_\_\_\_  
 \_\_\_\_\_

Name of Current School: \_\_\_\_\_

Student ID Number or SSN \_\_\_\_\_ Date of Birth \_\_\_\_\_

Country of Citizenship \_\_\_\_\_ Applying for Fall or Spring semester, 20 \_\_\_\_\_

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

By signing above, I request and authorize my current International Student Advisor or Designated School Official to provide the information below as part of my application for admission to Chandler-Gilbert Community College.

## TO BE COMPLETED BY DSO or INTERNATIONAL STUDENT ADVISOR

**This is NOT the student's OFFICIAL TRANSFER RELEASE request for your institution. This is only used for the purpose of determining admission to CGCC for the above student.** An admission decision will be emailed to the DSO after all admission requirements have been reviewed. Please complete the information below. Faxes will be accepted. Your signature below "confirms that the record for the student above has been entered into SEVIS. A SEVIS transfer in accordance with 8 CFR 214.2 (f)(8)(ii)(c) is to be processed by Chandler-Gilbert Community College." Although CGCC has two campuses, please transfer students to CGCC – Pecos Campus SEVIS School Code **PHO214F00442000**.

Complete Name of Institution \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_

SEVIS ID # **N** \_\_\_\_\_ Approximate SEVIS Release Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Student's Current Visa Type (F or J) \_\_\_\_\_ Other (explain) \_\_\_\_\_

I-94 Admission Number \_\_\_\_\_ Completion date on current I-20 (m/d/y) \_\_\_\_/\_\_\_\_/\_\_\_\_

Dates of enrollment while attending your institution (m/d/y): From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Has the student participated in practical training? (*circle one*) Curricular or Practical Dates: \_\_\_\_\_

Is the student currently in legal F-1 or J-1 status? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the student eligible to transfer to Chandler-Gilbert Community College? Yes \_\_\_\_\_ No \_\_\_\_\_

Has this student fulfilled financial obligations to your institution? Yes \_\_\_\_\_ No \_\_\_\_\_

If you answered NO to any of the above questions, please explain: \_\_\_\_\_

Name of DSO \_\_\_\_\_ Signature of DSO \_\_\_\_\_

Title of DSO \_\_\_\_\_ Date of signature \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

**Please send or fax to: Chandler-Gilbert Community College, International Education Program  
 2626 E. Pecos Road, Chandler, AZ 85225 OR Fax to: (866) 579-8242 – toll free**