

Trenholm State Community College
International Student Transfer Clearance Form
Office of Admissions and Enrollment Management

The following information is required for F-1 visa holders in order to process admission and transfer to Trenholm State Community College. Please complete Section A and submit this form to the PDSO/DSO or International Advisor at your most recent U.S. school.

SECTION I – TO BE COMPLETED BY THE STUDENT

Name _____
Family Name First Name Middle Name

Academic semester and year you wish to begin your studies at Trenholm State _____

I authorize my International Student Advisor (or PDSO/DSO) at the school where I am currently registered to provide the information below as part of my application for admissions to **Trenholm State Community College**.

Student Signature: _____ Date: _____

Student Phone Number: _____ Email Address: _____

SECTION II- TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR

The student named student has applied for admission to Trenholm State Community College. Your assistance is appreciated in completing this section below and returning this form with a copy of the student's current I-20 to:

**Trenholm State Community
College Office of Admissions and
Enrollment P.O. Box 10048
Montgomery, AL 36108**

INS Admission (I-94) Number: _____ Visa Type: _____

SEVIS ID Number: _____ SEVIS Release Date: _____

Please Note: This form must be completed prior to issuance of the Trenholm State Admission Letter. Upon admission to Trenholm State, please release the student's SEVIS record to the campus indicated in Section I.

Please mark **all** statements that apply:

_____ The student is in good standing and is/has been pursuing a full course of study.

_____ The student is out of status and a reinstatement to student status was filed on (date) _____ at the USCIS office in (place) _____ and is pending. (Please enclose copies of documents filed with USCIS.)

_____ The student is out of status.

_____ The student is currently under practical training. Please list all periods of authorized practical training (curricular or optional) if known. _____

Signature of School Official _____ Date _____

Name and Title _____

Institution _____ Telephone Number _____

Address _____
Street City State Zip

It is the official policy of Trenholm State Community College that no employee or applicant for employment or promotion, shall be discriminated against on the basis of any impermissible criterion or characteristic including, without limitation, race, color, national origin, religion, marital status, disability, sex, age or any other protected class as defined by federal and state law.

Trenholm State Community College is also an Equal opportunity Educator. It is the policy of the College that no student or other person because of age or race/color, national origin, sex, religion, disability, or the like shall be excluded or limited from participation in or be denied the benefits of any college program or activity.