

Transfer-In Form

Students on F-1 visas wishing to transfer to Logos Evangelical Seminary must complete Section A and have Section B completed by the institution they are currently attending.

Section A		
(To be completed by the student)		
Student Name: _____		Date of Birth: _____
_____	_____	_____
Student I.D	Signature	Date

Section B		
(To be completed by an International Advisor / DSO at student's current school.)		
Dates of Attendance at current school: from: _____ to _____		
1. Is the student currently in status? <input type="checkbox"/> Yes <input type="checkbox"/> No		
2. Is the student eligible to transfer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
3. Indicate student's education level: <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctoral		
<input type="checkbox"/> Language Training <input type="checkbox"/> Other (please indicate) _____		
4. Did the student complete the course of study? <input type="checkbox"/> Yes <input type="checkbox"/> No		
5. Did the student request Optional Practical Training (OPT)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please provide OPT dates: Start Date: _____ End Date: _____		
_____		_____
Name of P/DSO	Title	
_____		_____
Name of School	City / State	
_____		_____
Phone Number	Signature of P/DSO	Date
SEVIS Information:		
SEVIS ID#: _____		School File#: _____ 214F _____
Release Date: _____ Please release to <u>Logos Evangelical Seminary LOS 214F 0513000</u>		