



Ozarks Technical Community College

International Programs and Service Office

TRANSFER RECOMMENDATION/RELEASE FORM

Dear International Student,

If you are currently attending a school, college, or university on F1/J1 status in the United States, your student status and SEVIS record must be transferred to Ozarks Technical Community College (OTC). Please note that only one school at a time may access your SEVIS record. Consequently, *it's important that your decision to attend to attend Ozarks Technical Community College is certain before you submit this form to you current foreign student advisor for completion.* If you have decided to attend OTC, please complete Section 1 of this form, discuss the "Transfer Release Date" with your current foreign student advisor and fax the completed form to the number listed below.

SECTION I – To be completed by the F1/J1 international student transferring to OTC.			
Last (family) name:		First (given) name:	
Current Address:		Apt. #:	
City:		State:	Zip Code:
Date of Birth:	Telephone:	Current E-mail:	
Semester you intend to enroll at OTC:		Expected degree at OTC: <input type="checkbox"/> Associate <input type="checkbox"/> None	
Current Status: <input type="checkbox"/> F-1 <input type="checkbox"/> J-1 Other: Not applicable		Date of most recent entry in the US:	
Form I-94 #:		Do you have dependents with you in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>I hereby request and give my permission for the information below to be released to Ozarks Technical Community College.</i>			
Signature:		Date:	

SECTION II – To be completed by the International Advisor/School Official at current school.	
<i>Please complete the following information on behalf of the above-named student.</i>	
SEVIS ID#:	Transfer Release Date in SEVIS:
Is the student currently in good standing (academic and/or student conduct)? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," please explain:	
Has student had an "Authorized Drop Below" entered in SEVIS? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," please explain:	
Has student been authorized for practical/academic training? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," please list type (full/part-time and dates): Type: _____ Full/Part-time: _____ Dates: _____	
Last Term/Year of Enrollment:	Is student in valid F-1/J-1 Status? <input type="checkbox"/> Yes <input type="checkbox"/> No
If the student is out of status, does s/he have an application for reinstatement pending with USCIS? <input type="checkbox"/> Yes <input type="checkbox"/> No	

The information on the above-named student is accurate and true to the best of my knowledge:

Signature of School Official:	Printed Name:
Title:	E-mail:
School Name:	Date:
Address (street, city, state, and zip):	If mailing this form, please attach your business card. Thank you!

****Please Include a Photocopy of Student's Current Form I-20 ****
E-mail scanned copy to: ipo@otc.edu, or fax to: (417) 447-6925