



TRANSFER ELIGIBILITY FORM

(For Applicants Transferring from other US. Schools, Colleges & Universities)

PART I: To the Student Applicant:

Complete the information below, then present the "Transfer Eligibility Form" to the International Student Advisor at the institution you are currently attending.

Applicant's Name: _____
Last(Family) *First Name* *Middle*

Date of Birth: _____ SEVIS ID#: _____
mm/dd/yyyy

Student's Signature Date

PART II: To The International Student Advisor

All information must be completed in order for this form to be acceptable. Please do not release the Student's SEVIS record to Western Covenant University until an official acceptance letter has been presented. Also, be advised that Western Covenant University DOES NOT ACCEPT COMPLETED or TERMINATED student record to be transferred to our institution.

Current Student Status:

The student is in good standing and is/has been pursuing a full course of study: Yes ___ No ___

The student is out of status, and we will advise him/her to apply for reinstatement upon receipt of a SEVIS I-20 from the Western Covenant University: Yes ___ No ___

The student has met all financial obligations: Yes ___ No ___

SEVIS I-20 Information

Address of Institution: _____

Institution Name: _____ Transfer Release Date: _____

Title/Name: _____ Phone Number: _____

Signature Date

Please return to:

Western Covenant University
International Student Admission
3333 Wilshire Blvd., Suite 700 Los Angeles, CA 90010
Tel. 213-293-1771 email. info@wcuniversity.edu

*** Western Covenant University SEVIS School Code: LOS214F54333000