

**Colby Community College
International Student
Transfer Form**

International Students on an F-1 visa who are transferring to Colby Community College from another United States academic institution must complete the following procedures required by the Department of Homeland Security.

- 1. The International Student Office at your current United States school must complete Section 2 of this form and return it to the Colby Community College International Student Advisor.**

- 2. Report to the International Student Advisor at Colby Community College in person within one week of the start of the semester or summer session. Bring the following items to that meeting:**
 - 1. I-20 from previous school and I-20 from CCC (if you have received one).**
 - 2. Items listed on the International checklist on the CCC website www.colbycc.edu.**
 - 3. Passport and official transcript.**

To maintain your F-1 student visa status it is your responsibility to complete the transfer process described above no later than one week after enrolling at Colby Community College.

Section 1: To be completed by student

Name of Student _____

Current Address _____

Current Telephone Number _____ **Date of Birth** _____

Home Country _____ **Date of Admittance in U.S.** _____

Name of School Transferring from: _____

I authorize the release of this information by the International Student Advisor for the purpose of transferring schools.

Student Signature _____ **Date** _____

**Colby Community College
International Student
Transfer Form**

Section 2: To be completed by the International Student Advisor

Student SEVIS # _____

1. () Student is currently in status and eligible for transfer.

() Student is out of status and should apply for reinstatement.

Reason for being out of status: (check all that apply)

____ **Financial Obligations to the Institution**

____ **Academic Probation (current g.p.a. _____)**

____ **Misconduct** _____

____ **Criminal Misconduct** _____

____ **Other (please explain)** _____

2. Dates of Attendance: _____

Name and Address of School: _____

Name and Title of International Student Advisor:

Telephone: _____ **Email:** _____

Signature: _____ **Date:** _____

Please transfer in SEVIS to: Colby Community College (KAN214F00115000)

Please return completed form to:

**International Advisor
Colby Community College Admissions
1255 South Range
Colby, KS 67701**

or

Fax: (785) 460-4691

(785) 460-4690/1-785-460-4690

admissions@colbycc.edu