

Lincoln University

VERIFICATION OF ELIGIBILITY FOR SCHOOL TRANSFER

School Code: SFR214F00641000

TO THE STUDENT: If you are transferring to Lincoln University from another school in the United States, Please complete items 1-9 below. Please ask the Designated School Official at your current school to complete items 10-24.

1. Your name _____
Last (family) Name First name Middle name (exact names appear on you passport)

2. Date of birth / ____ / ____ _____ 3. Country of citizenship _____
Mon Day Year

4. Country of birth _____ 5. Country of permanent residence _____

6. Admission (I-94) number _____ 7. SEVIS ID number _____

8. Anticipated last day of study at the current school _____

9. I authorize you to provide Lincoln University with the information requested below. It is my intention to transfer to a program or study at the Lincoln University.

Signature _____ Date _____

TO BE COMPLETED BY THE DESIGNATED SCHOOL OFFICIAL (DSO):

Please note: This is not a request to release the student's SEVIS record at this time.

10. Name of DSO _____ 11. Is your institution enrolled in SEVIS? yes no

12. Name of the institution _____

13. Address _____

14. Phone (____) _____ 15. Fax (____) _____ 16. Email _____

In order to verify that the student named above is eligible to transfer to our program, we request the following information on his/her status at your institution:

17. Student's last date of attendance at your institution _____

18. Is student holding a SEVIS I-20? yes no 19. Current SEVIS status: _____

20. Student has been recommended for Optional Practical Training. EAD begins _____ ends _____

21. The Student _____ was attending full-time _____ was not attending full-time (please comment below)

22. To your knowledge is this student in status at this time? Yes _____ No. _____

23. Has the student fulfilled all financial obligations to your institution? Yes _____ No. _____

If no, please explain: _____

24. Comments: _____

Date: _____

Signature of Designated School Official

401 Fifteenth Street, Oakland, California 94612 - Telephone (510) 628-8010 - Fax (510) 628-8012