



GEORGIA
CENTRAL UNIVERSITY

6789 Peachtree Industrial Blvd Atlanta GA 30360
Tel: 678-535-7771 Ext102 Fax:770-441-1559
www.gcuniv.edu Admissions@gcuniv.edu

ATL School Code :ATL214F57455000
NJ School Code :ATL214F57455001

TRANSFER CLEARANCE

F1 APPLICANTS IN THE U.S. :

In order to complete your registration, you must submit this completed form with your completed application.

Session of Application: Fall 20____
 Spring 20____
 Summer 20____

Applicant's Name: _____
 (FAMILY) (FIRST)

Applicant's INS Admission #:
(The admission # is an 11-digit number found on the top left corner of your I-94 form)

Present Address: _____
 NUMBER & STREET NAME

CITY STATE ZIP CODE

Please sign the authorization below and ask your present International Student Advisor to complete page 2 of this form and return it directly to the Institute.

I give permission for my present school to release the information requested on page 2 of this form.

Student's Signature

TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR:

1. Is this student currently attending the school he/she was last authorized by INS to attend?
A _____ Student did not report to this school.
B _____ Student reported to this school but did not register or attend classes.
C _____ Student is currently enrolled in a full-time program. Student has been enrolled in this program since _____.
Current program dates are _____ to _____.
D _____ Student is not currently studying, but began studying in this program on _____ and completed the course of study on _____.
E _____ Student was registered for this program, but did not complete the course of study. Dates of attendance were _____.
F _____ Other: _____
2. Is the student currently taking an authorized vacation period? ____ YES ____ NO
If yes, please make sure #1D above is completed.
If yes, please include end date of the authorized vacation period: _____
3. Student has met all obligations to this school and is eligible to transfer. ____ YES ____ NO
4. To the best of your knowledge, this student is eligible to transfer to Georgia Christian University by one of the following procedures:
_____ School Notification
_____ Reinstatement (student is currently in violation of his/her status)
5. Student is currently in possession of a ___ Non-Sevis I-20 ____ Sevis I-20
6. Additional Remarks: _____

Signature of School Official

Name & Title of Official

School Address: _____

_____ Date _____