



School name as it appears on SEVIS: **Victoria College** SNA214F01840000

Please email completed form to Admissions@VictoriaCollege.edu.

ATTENTION STUDENT:

You are required to obtain a release from your current school prior to transferring to Victoria College. Please complete and sign this section of the form and take it to the International Student Office, at the school you are currently attending, for your current international advisor to complete.

Last/Family Name (Surname): _____ First/Given Name: _____

Date of Birth: _____ Do you have dependents in the U.S.? ___ Yes ___ No If yes, how many? _____
(mm/dd/yyyy)

Signature: _____ Date: _____
(mm/dd/yyyy)

TO BE COMPLETED BY THE INTERNATIONAL ADVISOR/DESIGNATED SCHOOL OFFICIAL AT THE CURRENT SCHOOL: Please provide the following information regarding the student's status in SEVIS.

First semester enrolled: _____ Last semester enrolled: _____

SEVIS ID#: _____ Transfer Release Date in SEVIS: _____ or ___ Upon proof of admission

Is the student in valid F-1 status? ___ Yes ___ No If no, is a reinstatement to valid status required? ___ Yes ___ No

Please complete all applicable sections below:

Current/previous periods of curricular practical training (CPT): _____

Current/previous periods of optional practical training (OPT): _____

Current/previous Reduced Course Load, Reason & Dates: _____

Current/previous Medical Reduced Course Load Dates: _____

Name of Designated School Official

Title of Designated School Official

Date

Signature of Designated School Official

Email Address

(_____) _____
Telephone Number

Name of Institution