

INTERNATIONAL STUDENT TRANSFER-IN FORM

Have you been admitted to New England College? ☐ YES ☐ NO (If no, please do not submit this form until after your admission to NEC has been confirmed.)

Part I – to be completed by the student

1.	Name (as it appears in passport):				
		Family name(s)		Given name(s)	
2.	Address: Street name and number			City, state, zip	
3.	Phone:		Email:		
4.	Semester / Year of intended enrollment at New England College:				
5.	Current visa category: Country of citizenship:				
	Any dependents in the US? YES NO If yes, please list the number of dependents: Spouse Number of children				
I hereby request and provide authorization for the school official listed below to provide the requested information to New England College					
	Student signature		Date (mm/dd/yyyy)		
Part II -	- to be completed by the DSO/Intern	ational Student Ad	visor at current	school	
1.	Is the above information completed by the student correct? \square YES \square NO				
2.	To the best of your knowledge, is this student currently maintaining legal status? \square YES \square NO				
3.	Please indicate the student's dates of	of attendance at you	ur institution: Fr	om To	
4.	Practical Training Used: (OPT – Date	s): From	To	□ Full-time □ Part-time	
	(CPT – Dates	s): From	To	☐ Full-time ☐ Part-time	
5.	Student's SEVIS number	<u>-</u>	SEVIS transfer release date?(NEC School Code: BOS214F00408000)		
DSO's signature		Date		Email	
DSO's p	printed name and title				
School Name		City/St	ate	Phone number	

Please return this completed document by mail, email, or fax, to:

Graduate Admissions