Print: Student Last Name, First Name, MI

Birth Date

Student’s Signature: ________________________________

I authorize release of the information below to WinCC

Date

The following section must be completed by your International Student Adviser at your current school. Your new I-20 will be issued to you after your current school has designated your release date.

To be Completed by Designated School Official

Student INS Admissions No.: ____________________

Student SEVIS ID: ____________________

☐ I verify the above student was enrolled at this school for full course of study and is eligible for F1 school transfer.

1) Dates of Enrollment: From: ________________ (month/day/year)

To: ________________ (month/day/year)

2) SEVIS Release Date: ________________ (month/day/year)

3) The above named student (check all that apply):

☐ completed program of study with satisfactory performance

☐ is currently enrolled full-time and term ends: ________________ (month/day/year)

☐ is in an Optional Practical Training that ends: ________________ (month/day/year)

☐ is expected to receive a degree by: ________________ (month/day/year)

Type of Degree: ________________ (e.g. AA, AS, AAS, CA, BA,)

☐ was authorized to enroll less than full-time during: ________________ (month/day/year)

☐ The student is NOT eligible for INS/SEVIS transfer of schools because: ________________

Release Student To (mail or fax form): Windward Community College - Admissions and Records Office

SEVIS code: HHW214F00239000

45-720 Kea’ahala Road • Kāne‘ohe, HI 96744

Phone: (808) 235-7432 Fax: (808) 235-7496

Name and Address of School

Phone/Fax Number

Signature of School Official Date

Print Name and Title