



I-20 Transfer Form

Office of International Studies
2100 S. Mobberly Ave.
Longview, TX 75602
AlanClipperton@letu.edu
RebeccaHaesecke@letu.edu
SarahEpling@letu.edu
903-233-3170

The USCIS requires the LeTourneau University Office of International Studies to have the following information in order to process your transfer to *LeTourneau University*. Please complete the information in Section 1, then submit this form to the International Student Advisor (Designated School Official) at your present school to complete Section 2. The completed form can be mailed or emailed to the emails or address above.

Section 1: TO BE COMPLETED BY THE STUDENT

Name of Student: _____ Birthdate: _____
Last First Middle month/day/year

Country of birth: _____ Country of Citizenship: _____

Intended Major at LeTourneau University: _____

*I request and authorize my present International Student Advisor (Designated School Official) to provide the information in Section 2 as a part of my application for admission to **LeTourneau University**.*

Student Signature: _____ Date: _____

Section 2: TO BE COMPLETED BY THE DESIGNATED SCHOOL OFFICIAL

- 1. _____ The student is in good standing and is/has been pursuing a full course of study.
 _____ The student is out of status and a reinstatement to student status was filed.
 _____ The student is out of status, and we will advise him/her to apply for reinstatement upon receipt of a new I-20 form *LeTourneau University*.

2. Student's projected date of completion (from I-20): _____

3. Student's date of last attendance at our school: _____

4. Student's SEVIS ID NUMBER: _____

5. Date of SEVIS TRANSFER: _____

- 6. _____ During his/her attendance at our school, the student completed an intensive English/ESL program.
 _____ During his/her attendance at our school, the student did not complete a degree program.
 _____ During his/her attendance at our school, the student completed the following degree program(s):

Type of Degree: _____ Date of Completion: _____

7. Has the student had any financial difficulties at this institution? () YES () NO

If yes, please explain _____

Please release the student's I-20 to the appropriate LeTourneau University campus according to intended major (indicated in Section 1):

Non-aviation majors: LeTourneau University, school code **DAL214F00908000**
Aviation/aeronautical majors: Paul & Betty Abbot Aviation Center, School Code **DAL214F00908006**

_____ Name and Title of DSO	_____ Signature
_____ Name of Institution	_____ Date
_____ Address	_____ Telephone Number
_____	_____ Email