



**Office of International Student Admissions**

**TRANSFER ELIGIBILITY FORM**

**Non-immigrant international students who are applying to Greenville Technical College and currently attending another college or university in the United States must submit a Transfer Recommendation Form to the International Student Advisor.** Students should complete the top portion of the form and the International Student Advisor at the current school should complete and sign the bottom of the form. A copy of your latest I-20 and the I-94/visa page from your passport should be included when returning the form.

**To be completed by the student**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Email address \_\_\_\_\_

Mailing address \_\_\_\_\_

Current Visa Status \_\_\_\_\_ SEVIS Number \_\_\_\_\_ I-94 expiration date \_\_\_\_\_

Institution transferring from \_\_\_\_\_ Expiration date of previous I-20 \_\_\_\_\_

Indicate the term and year you wish to enter Greenville Technical College: ☐ Fall ☐ Spring ☐ Summer

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

**To be completed by the International Student Advisor:**

Is the student currently in status with INS? \_\_\_\_\_

Is the student in good academic standing at your institution? \_\_\_\_\_

Was the student enrolled full-time last semester/current semester? \_\_\_\_\_

Does the student have any remaining balance owed to your school? \_\_\_\_\_

Has the student been authorized for work or practical training? \_\_\_\_\_

If yes, please specify type of work and dates \_\_\_\_\_

Other remarks: \_\_\_\_\_

Date to be released in SEVIS \_\_\_\_\_

Signature of School Official \_\_\_\_\_

Name and Phone Number \_\_\_\_\_

Institution Name and Address \_\_\_\_\_

**Please return this form to the International Student Admissions Officer**

MS 1025 Post Office Box 5616 Greenville, South Carolina 29606-5616  
(Phone) 864-250-8000 (Fax) 864-250-8534