International Student Transfer In Request

If you are planning to transfer to Yuba Community College District, please complete the Section 1. of this form. Take this request to your International Student Advisor/DSO at the school you are currently attending complete Section 2.

TO BE COMPLETED B	<u>Y THE STUDENT</u> :	(Please	Print - Clearly)	
Name: Last name Fi	rst	Soc	Social Security No. or ID Number	
Current address				
City	State	Zip Code		
I authorize you to pro	ovide Woodland Co	ommunity College with t	the information requested below.	
		One) Y.C.C.D Yuba Col semesterm and Year)	llege, Woodland Community Colleg ster.	
Student Signature		Date	Date of Birth	
Student - Printed Na	 me	Country o	f Citizenship	
College. Please completed. Thank you	lete and fax or mail to I.	o the address listed below	admission to Woodland Community so that his/her transfer may be Phone	
			T Hone_	
_			r school?	
	•			
If so, what will be the	e release date? NT'S SEVIS RECORD TO -		GE DISTRICT – Yuba College, Woodland	
SEVIS I.D. Number				
Signature of Designated	School Official	Printed Name	Date	
Email Address of DSO: _				
Please mail or fax this form to:		Woodland Community College ATTN: Kerry Pope International Student Representative		
FAX Number: 530-	661-5705		2300 E. Gibson Road	

Woodland, CA 95776 USA