GRCC International Student Transfer-In Form

To the International Student:

Please complete **Section 1** of this form, then have the International Advisor at your current school complete Section 2. Please also provide them with a copy of your GRCC letter of admission.

To the International Advisor:

The student named below has applied for admission to Grand Rapids Community College. Your assistance is appreciated in completing **Section 2** below and returning this form to GRCC.

Thank you for completing this form. Please return it to:

International Student Admissions Advisor GRCC Admissions Office Grand Rapids Community College 143 Bostwick Ave NE Grand Rapids, MI 49503-3295

Phone: (616) 234-3569 Fax: (616) 234-4107

Email: international students@grcc.edu Website: www.grcc.edu/international

Section 1 (to be completed by the student)			
Name:			
Date of Birth (00/00/00): / / / (Year)			
Current U.S. Address:(Street)			
(City)		(State)	(Zip Code)
Email Address: Pho	one:		
Year/Semester you will begin study at Grand Rapids Community College:	☐ Fall (August)	☐ Winter (January)	Year
I permit the information requested below to be forwarded to GRCC.			
Student's Signature		Date (month/day/yea	ar)
Section 2 (to be completed by the international student adv SEVIS Release Date (00/00/00):(Month) /(Day) /(Year) SEV			
Dates of attendance at your institution:			
To the best of your knowledge, is this student in good standing based on USCIS regulations?			
Are there any immigration concerns we should be aware of? If yes, please	explain. □ Y	es □ No	
OPT/CPT granted?			
Name:			
Institution: Tit	le:		
Email Address:		Phone:	
Signature of International Advisor		Date (month/day/yea	ar)

GRCC SEVIS School Code: DET214F00316000



