

Harrisburg Area Community College Center for Global Education International Admissions One HACC Drive, Cooper Center 101A Harrisburg, PA 17110 Ph: 717-780-2403 Fax: 717-780-2436

INTERNATIONAL STUDENT TRANSFER FORM

Please have your International Student Advisor complete this form and return it to the International Admissions Coordinator at HACC in order to complete your transfer to HACC.

I request and authorize my present International Student Advisor (or equivalent campus officer) to provide the information below as part of my application for admissions to Harrisburg Area Community College.

(Student Name-Please Print)	(Student Signature)	(Date)
Campus you wish you transfer to at HACC:	Gettysburg Campus Harrisburg Campus (Lancaster Campus (P Lebanon Campus (PI York Campus (PHI2	PHI214F00882000) PHI214F00882001) HI214F00882004)

TO BE COMPLETED BY INTERNATIONAL STUDENT ADVISOR:

1. Name of Student		
2. SEVIS Number	Transfer Release Date	
3. Name of School		
4. Address of School		
5. To the best of your knowledge, is this student currentl	y maintaining legal status? Yes N	lo
6. Please list any approved periods of Curricular or Optional Practical Training used:		
7. Please list dates and reasons for any approved Reduce	ed Course Loads used:	

Name and title of official completing this form

Email

Telephone

Name and address of institution

Signature Date