



**Phoenix College
International Student Center**

**1202 West Thomas Road
Phoenix, AZ 85013
Phone: 602.285.7424
Fax: 602.285.7578**

F-1 STUDENT TRANSFER INFORMATION

I give permission to _____ to release the following information to Phoenix College since I am planning to transfer to Phoenix College.

Student's Signature: _____ Date: _____

Student's Name: _____

Name of your institution: _____

Address of your institution: _____

The above named student is transferring to Phoenix College, school code PHO214F00096000. Please provide the following information so that we may continue to process the student's application for the I-20 document:

- What date will the SEVIS record be released from your institution? _____
- What is the student's SEVIS ID number for your institution? _____
- Please choose all that apply:
____ The student is in good standing and is/was enrolled in a full course of study.
____ The student is out of status, and a reinstatement is pending.
____ The student is out of status and must be reinstated.

If you have any questions, please call the Phoenix College International Student Center at (602) 285-7424.

Name of Designated School Official

Phone Number

Signature of Designated School Official

Date