

**REQUIRED SUPPLEMENTAL INFORMATION/TRANSFER REPORT FOR
APPLICANTS NOW IN THE UNITED STATES ON NONIMMIGRANT VISAS**

INSTRUCTIONS TO APPLICANTS IN THE U.S.: All students should complete Section A of this form. If you are on an F-1 visa, you should request the International Student Advisor or counselor at the school you currently attend or most recently attended to complete Section B. You must provide your school with the date needed to complete question #7 on Side B. You will not be issued an I-20 from Meridian University until this form is completed and returned with the documents requested and the current school releases you for transfer. Once you are issued an I-20 from UI&U, you must report to UI&U within 15 days of the beginning of classes to have your transfer processed. If you are not an F-1 visa holder, complete Section A only and return the form with the required documentation. All documents should be sent to the address indicated on the back of this form. **DO NOT TURN THIS FORM IN TO YOUR INTERNATIONAL OFFICE UNTIL YOU HAVE DECIDED, FOR CERTAIN, TO ATTEND MERIDIAN UNIVERSITY.**

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SECTION A: INFORMATION FURNISHED BY THE APPLICANT

FULL NAME _____

(Family or surname) (First or given name) (Middle name)

I plan to travel outside the U.S. before reporting to the Meridian University (Check One): Yes No

COUNTRY OF BIRTH _____ COUNTRY OF CITIZENSHIP _____

Overseas Address: We cannot prepare your I-20 or DS-2019 if you don't provide an overseas address.

TERM OF INTENDED ENROLLMENT AT MU: _____ MAJOR FIELD OF STUDY _____ DEGREE SOUGHT _____

MOST RECENT US INSTITUTION ATTENDED _____ DATES OF ATTENDANCE from _____ to _____
(Name of Institution)

Place an X next to the visa classification you now hold and attach copies of the documents requested.

_____ F-1 student: Attach copies of your I-94 (both sides) and all I-20's issued to you.

_____ F-2 dependent: Attach copies of your I-94 (both sides), your visa, your passport, and your spouse's I-20 ID.

_____ J-1 student: Attach copies of your I-94 (both sides) and all IAP-66's issued to you.

_____ J-2 student: Attach copies of your I-94 (both sides), your visa, your passport, and your spouse's IAP-66's.

_____ L-2 dependent: Attach a copy of your I-94 (both sides), your visa, your passport.

_____ H-1 employee: Attach copies of your I-94 (both sides), I-797 approval notice, your visa, your passport.

_____ H-4 dependent: Attach copies of your I-94 (both sides), your visa, your passport.

_____ Other: Please specify and attach documentation (I-94, visa, passport, approval notice, etc.).

If your immigration status is something other than F-1, please contact MU if you wish to change your status to F-1 student.

Authorization

If F-1, I understand that I must report to Meridian University and have my transfer completed within 15 days of beginning my program at MU. Further, I Hereby authorize the foreign student advisor at the U.S. institution I have most recently attended to review the information provided above and on the attached photocopied documents, to provide the additional comments requested in PART B of this form, and to provide MU with a release date for my SEVIS records.

Signature _____

SECTION B: FSA REPORT

INSTRUCTIONS TO THE DESIGNATED SCHOOL OFFICIAL AT THE INSTITUTION CURRENTLY OR MOST RECENTLY ATTENDED BY THE APPLICANT. Before filling out Section B, please review the information the applicant has provided in Section A against the records maintained in your office. Please answer the following questions and return the completed form to the address given at the bottom of this page with the appropriate attachments. In SEVIS we are listed as Meridian University.

1. Is the information furnished in Section A (including photocopies of certificates of eligibility) complete and accurate according to records in your office? YES NO (If NO, please comment)

2. To the best of your knowledge, is this student currently in status with DHS? YES NO

3. If the applicant is in F-1 status, please indicate from your records his/her:

First day of F-1 status _____ I-94 Admission Number _____

Dates attended at your institution: From _____ To _____

Practical Training authorized by your institution (Please indicate type and specific dates):

If your institution is a PUBLIC SECONDARY SCHOOL (High School):

Date student first enrolled at your institution _____

Date I-94 card expires _____

4. If the applicant is in J-1 status, please indicate from your records his/her:

First day of J-1 status _____ I-94 Admission Number _____

Name of Program Sponsor _____

Academic Training Authorized (Specify Dates) _____

5. Is your institution a SEVIS Certified School? Yes No

6. Has the student been entered into SEVIS by your school? Yes No

7. What date will this student officially be released for transfer in SEVIS? ___/___/___

8. Has the student been authorized for a reduced course of study due to academic difficulties or a medical condition? Yes No. If yes, please list the level of study the student was engaged in at the time of

the authorization(s) and date(s) for each authorization.

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Name and Title of FSA _____

Address _____

Telephone () _____ fax () _____

Signature _____ Email: _____

PLEASE RETURN THIS FORM AND ATTACHMENTS TO:
c/o Rob Gall, PDSO
47 Sixth Street

Meridian University

Petaluma, CA 94952