

English Language Institute
116 Allen Hall
P.O. Box 9742
Mississippi State, MS 39762
eli@msstate.edu
662.325.2648

TRANSFER IN REQUEST FORM

Part I. To be completed by the student:	
I authorize my present International Student Advi the English Language Institute at Mississippi State	sor to provide the requested information for my transfer to University.
Name of Student	SEVIS ID number
Student's Signature	Date
Semester/session applying for	_
Part II. To be completed by current Internation	nal Student Advisor:
Student is in good standing and is/has	been pursuing a full course of study.
Student is out of status and has been a	dvised to apply for reinstatement upon arrival at MSU.
_ Other:	
Name of School	
Name of D.S.O	
SEVIS Release Date	
Signature of D.S.O.	Date
Telephone Number	
Fax Number	

Please mail or fax the completed form to our office.

English Language Institute
P.O. Box 9742
Mississippi State, MS 39762
Fax: (662) 325-4242
eli@msstate.edu
School code #: NOL214F10163001