

# HCC

## F-1 Student Transfer Eligibility Form

Student's Full Name \_\_\_\_\_  
(Family/Surname) (Personal name)

Student's ID or Social Security Number \_\_\_\_\_

I hereby authorize my current International Student Advisor or Responsible Officer permission to provide the information requested in this form in order to complete my transfer to Howard Community College.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

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Dates of student's attendance at your institution: \_\_\_\_\_

Did the student attend your institution on a full-time basis?  Yes  No

Was the student in good academic standing?  Yes  No

Do you consider this student to be in-status?  Yes  No

Do you consider this student to be eligible for transfer? If not, please explain why below.  
 Yes  No

SEVIS ID # \_\_\_\_\_ Release Date: \_\_\_\_\_

(The Howard Community College School Code is BAL214F00256000)

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of DSO \_\_\_\_\_

Institution \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Please return this form to:

International Student Advisor  
Office of Admissions and Advising  
Howard Community College  
10901 Little Patuxent Parkway  
Columbia, MD 21044-3197  
Tel. 410-772-4016  
Fax. 410-772-4589