



University of Wisconsin – Green Bay

Transfer Clearance Form

Return to: Office of Admissions 2420 Nicolet Drive Green Bay, WI 54311 Fax: 920-465-5754
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The student named below is applying to the University of Wisconsin-Green Bay (UWGB). In accordance with US CIS regulations, the Office of Admission at UWGB must ascertain the current status of this student in order to complete the admission process. If you have any questions, please contact the Office of Admissions at (920) 465-2111.

To Be Completed By The Student:

I, _____, intend to transfer to the University of Wisconsin – Green Bay. I grant permission for the information request below to be forwarded to UWGB.

(Signature)

(Date)

To be completed By The Designated School Official:

Current Visa Status: _____ Accompanying Spouse/Dependents? Yes _____ No _____

Expected Term of Transfer: _____ SEVIS Release Date: _____

For F-1 Applicants:

Admission Number: _____ Date of initial Entry as F-1: _____

For J-1 Applicants:

Admission Number: _____ Sponsor: _____

Category: _____ Two-year Home Residency Requirement: Yes _____ No _____

Last Semester enrolled as full time student: _____

Based on academics and social conduct, is this student in good standing

Yes _____ No _____ Please Explain _____

Is this student in good financial standing with her/his current institute?

Yes _____ No _____ Please Explain _____

Has this student ever been granted practical training? Yes _____ No _____

On the basis of this student's complete record, do you recommend this student for transfer to the University of Wisconsin-Green Bay? Yes _____ No _____

Comments: _____

P/DSO Name: _____ Title: _____

Institution: _____ Telephone: _____

Signature: _____ Date: _____