

NEO International Student Program

School Transfer Certification - Incoming

[For students transferring from a different U.S. College/University to NEO A&M College]

Section 1 – To Be Completed By the Student applying to NEO A&M College

Name: _____
[Last] [First] [Middle]

Mailing Address: _____

Home Phone: [country code] _____ [number] _____

Cell Phone: [country code] _____ [number] _____

Email Address: _____

Gender: Male Female Date of Birth (Month/Date/4 Digit Year): ____ / ____ / ____

City of Birth: _____

Country of Birth: _____

Country of Citizenship: _____

Signature of applicant

Date:

Section 2 – To Be Completed By the International Student Advisor at the College Where the Applicant is Currently Enrolled

Please answer the following questions regarding the student named above and return this form to:

*NEO International Program
200 I Street NE
Miami, OK 74354*

Name: _____
[Last] [First] [Middle]

INS Number: _____

Type of Visa: _____

Completion date on Current I-20 form: _____

Please check all the appropriate statements:

- This student is in status with all INS regulations
- This student is out of status and a reinstatement was filed on _____ and is pending.
(Please attach documentation of reinstatement request.)
- This student is out of status and must apply for reinstatement.
- This student is eligible for re-enrollment.

Name of Institution: _____

Name and Title of DSO: _____

Email of DSO: _____

Institution Mailing Address: _____

Phone number: _____

“I hereby certify that the above information provided is true and accurate.”

Signature of applicant