

York County Community College

I-20 Transfer-in Form

This form is required for international students in the U.S. with F-1 immigration status at another institution. You must ask an international student advisor at your current institution to complete the form below and return it to us as soon as possible. Once you arrive at YCCC, make an appointment with Jessica Masi in the office of Registration and Records. Be sure to bring all your visa documents (passport, I-20, etc) to the appointment. Jessica will then endorse your I-20 and notify USCIS that you are now a student at YCCC. **This notification process is required in order for you to maintain your F-1 immigration status. Failure to complete the process will put you out of status.** Please feel free to contact the enrollmentservices@yccc.edu if you have any questions.

SECTION I – TO BE COMPLETED BY STUDENT

Name of Student: _____
(Last Name) (First Name) (Middle)

Date of Birth: _____
(mm/dd/yyyy)

Semester that you are enrolling at YCCC: Fall/Spring/Summer _____ Year that you plan to enroll at YCCC: _____

I intend to enroll at York County Community College during the semester stated above. I hereby grant permission to release the information requested below and to transfer my electronic immigration record to SMCC.

Signature: _____ Date: _____

SECTION II – TO BE COMPLETED BY INTERNATIONAL OFFICE AT CURRENT SCHOOL

The student named above has indicated an intention to transfer to YCCC. Please provide the information requested below so that the student's eligibility for immigration transfer may be determined.

Institution Name: _____ City/State: _____

Student SEVIS ID #: _____ SEVIS Transfer Release Date: _____

Visa Type: _____ Completion Date on I-20: _____ Last Semester Attended: _____

Provide any dates student was approved for Optional Practical Training or Curricular Practical Training:

OPT-- From: _____ To: _____ Full-Time or Part-Time (please circle) CPT--From: _____ To: _____

Would this student be permitted to continue at or return to your institution? Yes: ____ No: ____ If no, please explain below.

Additional Comments: _____

Please Note: YCCC's F-1 School Code is [POM214F00300000](#)

I certify that the student named above **has been/has not been** (*circle one*) pursuing a full course of study at our institution during the semester immediately preceding this intended transfer (or during the last semester preceding the annual vacation). I further certify that to the best of my knowledge the preceding information is correct and the above-named student has maintained his/her legal status.

Signature: _____ Date: _____ Phone Number: _____

Name and Title (please print): _____ Email: _____

Please return/fax this form with a photocopy of the student's current I-20 to: Jessica Masi, 112 College Drive, Wells, ME 04090.
FAX: (207) 641-0837. For questions, please contact: Jessica Masi PDSO and Director of Registration and Records jmasi@yccc.edu