



Transfer-In Form for F-1 Students

Dear Prospective Mid-Amrica Student,

In order to prepare your SEVIS Form I-20, Mid-America needs information from your current institution. Please sign below giving permission to your current school to release the following information about you for transfer.

Last Name: _____ First Name: _____

Email: _____ Phone: _____

Signature: _____ Date: _____
Your signature authorizes your current school's DSO to provide the requested information to Mid-America. MM/DD/YYYY

Dear International Student Advisor (DSO),

The above student has been accepted by Mid-America. To facilitate the transfer process, please provide the following information, confer with the student, and determine the SEVIS Release Date.

Our SEVIS name: **Mid-America Baptist Theological Seminary**. Our School Code: **NOL214F10470000**.

1. SEVIS ID: _____ Release Date: _____
MM/DD/YYYY
2. Please indicate any Curricular Practical Training (CPT) and Optional Practical Training (OPT) period authorized to the student while attending your Institution:
 - a. CPT from _____ to _____ PT or FT _____
 - b. OPT from _____ to _____ PT or FT _____
3. Please check one of the following:
 - The student is maintaining a full course of study and is in good status to the best of my knowledge.
 - The student is out of status and a reinstatement to student status is pending.
 - The student is out of status and will be advised to apply for reinstatement upon receipt of a new I-20 from Mid-America.
4. If student is out of status, please explain: _____
5. Beginning date of attendance at your Institution: _____
6. Ending date of most recent completed semester/term: _____

Name and Address of Institution (Print): _____

Name of DSO Completing Form (Print): _____

Signature of DSO: _____ Date: _____
MM/DD/YYYY

Email of DSO: _____ Phone: _____

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