



## Transfer Request Form (Chicago)

Note: Students who are transferring to Midwestern Career College from another U.S. institution are required to submit this form. Student must complete and sign Part A to grant permission for the information requested below.

### Part A: (to be completed by the student)

Student's Name: \_\_\_\_\_ Contact # \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_ Apt #: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Country of Citizenship: \_\_\_\_\_ I-94 #: \_\_\_\_\_

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

### Part B: (to be completed by the DSO)

International Student Advisor:

The student listed above has applied for admission to **Midwestern Career College**.  
Please complete and return this form by fax at **(312) 277-1007** or email at **international@mccollege.edu**.  
Attention of International Admissions. **School Code: CHI214F01777000**.

1. Dates of Attendance: From: \_\_\_\_\_ To: \_\_\_\_\_

2. Is the student full-time? **Yes / No** (Please explain if NO) \_\_\_\_\_

3. Is the student in good standing financially? **Yes / No** (Please explain if NO) \_\_\_\_\_

4. Is the student eligible to transfer or continue? **Yes / No** (Please explain if NO) \_\_\_\_\_

5. Is the student maintaining status? **Yes / No** (Please explain if NO) \_\_\_\_\_

6. Is the student in good academic standing? **Yes / No** (Please explain if NO) \_\_\_\_\_

7. Please list all beginning and ending dates of CPT or OPT \_\_\_\_\_

8. SEVIS release date: \_\_\_\_\_

DSO's Name: \_\_\_\_\_

School Name \_\_\_\_\_

Address \_\_\_\_\_

DSO's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_