Luther College
International Transfer Student Supplement

Non-immigrant students who are currently studying at an educational institution in the United States and wish to transfer to Luther College must complete this form.

1. Complete this side of the form yourself. All information should be typed or printed legibly.
2. Give this form to the International Student Advisor at the U.S. institution you are now attending, or the one you most recently attended. He/she must complete the reverse side of this form. The International Student Advisor should return this form to the Center for Global Learning at Luther College.
3. Please include a copy of your current I-20.

Full Legal Name:

<table>
<thead>
<tr>
<th>Last (family or surname)</th>
<th>First (given)</th>
<th>Middle or Maiden</th>
</tr>
</thead>
</table>

Present Mailing Address:

<table>
<thead>
<tr>
<th>Street and Number</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

Male ____ Female ____ Single ____ Married ____

Total number of Dependents with you in the United States ______

Country of Citizenship ____________________________ Visa Status ____________________________

Date of Entry into the U.S. ____________________________ SEVIS I-20 # ____________________________

Admission # (on I-94 card) ____________________________

School or Agency issuing Certificate of Eligibility (I-20, IAP-66) for Original Entry to United States:

____________________________________________________________________________________

Reasons for Transferring to Luther College:

____________________________________________________________________________________

____________________________________________________________________________________

Present Source(s) of Financial Support:

| Source: 1) ____________________________ | Amount: $ ____________________________ |
|______________________________________|______________________________________|
| Source: 2) ____________________________ | Amount: $ ____________________________ |
|______________________________________|______________________________________|
| Source: 3) ____________________________ | Amount: $ ____________________________ |
|______________________________________|______________________________________|

I hereby authorize my current International Student Advisor to verify the above information and to provide the additional information requested on the reverse side.

_____________________________ ________________________
Signature of Applicant Date
To International Student Advisor:

The student listed on the reverse side of this form has applied for admission to Luther College. We require verification of the information that he/she has provided on the reverse, as well as completion of the questions below, before the student’s application will be given further consideration. Thank you for your cooperation.

**Please return completed form to:**
Luther College
Center for Global Learning
700 College Drive, Decorah, Iowa 52101 USA

Do you know the applicant?  Well _____  Casually _____  Very Little _____

Is the student in good standing at your institution?  Yes ____  No ____

Is the student eligible to return or continue at your institution?  Yes ____  No ____

Is the student’s reason for seeking transfer to Luther College valid?  Yes ____  No ____  No Opinion ____

Student’s English proficiency:  Excellent ____  Good ____  Average ____  Poor ____

Basis for determination:  TOEFL ____  Other (specify) ____________________________

Indicate financial aid the student is receiving from your institution:
________________________________________________________________________
________________________________________________________________________

Has the student experienced financial problems while attending your institution?  Yes ____  No ____
*If yes, please specify ____________________________
________________________________________________________________________

Do you recommend this student for transfer to Luther College?  Yes ____  No ____

Please list any further remarks that you consider helpful as we review this application for admission:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

This form has been completed on the basis of:  Personal Interview ________  Student File ________
Consultation with student’s academic advisor ________  Other (specify) ________
________________________________________________________________________

__________________________________________  ________________________________
Name of International Student Advisor  Institution

__________________________________________  ________________________________
Signature of International Student Advisor  Date