



# GREAT BASIN COLLEGE TRANSFER VERIFICATION FORM

Great Basin College  
1500 College Parkway  
Elko, NV 89801  
http://www.gbcnv.edu

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**International students currently attending another U.S. institution must complete Section 1. Ask your International Student Adviser (DSO) to complete Section 2. This form must be received by the GBC Admissions Office before your new visa documents can be issued.**

**Section 1. The Student needs to complete this information:**

**Name: (Last) (First) (Middle)**

**Permanent Home Mailing Address: (Mailbox or Street, City, State or Province, Postal Code, Country)**

**SEVIS ID NUMBER (from I-20):**

**Social Security Number:**

**I understand that I must receive a letter of admission to GBC before I request a transfer. I also understand that when I submit a transfer to SEVIS, it cannot be cancelled. I request and authorize the International Student Adviser to provide this information as part of my application to Great Basin College.**

**Student Signature:**

**Date:**

**Section 2. The International Student Adviser will complete this section:**

**Transfer to: GREAT BASIN COLLEGE**

**School Code: PH0214F20004000**

**Dates of Attendance - From: \_\_\_\_\_ To: \_\_\_\_\_**

**Classification: F1 SEVIS RELEASE DATE: \_\_\_\_\_**

**To the best of your knowledge, has this student maintained his/her visa status? Yes No**  
**If No, please explain:**

**Does this student have any outstanding financial obligations? Yes No**  
**If Yes, please explain:**

**Has student utilized any Optional Practical Training or Curricular Practical Training? Yes No**  
**If Yes, provide dates: OPT: \_\_\_\_\_ CPT: \_\_\_\_\_**

**Any additional comments regarding this student?**

**International Student Adviser (DSO) Signature:**

**Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_**

**School Name: \_\_\_\_\_**

**& Address: \_\_\_\_\_**

**Date: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_**