



## International Student Transfer Form

### VALLEY CHRISTIAN ACADEMY

#### Part 1: To be completed by the applicant

Please complete Part 1 of this form and give it to your current International Student Advisor to complete Part 2.

I authorize my present International Student Advisor to provide the information below.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Name (last): \_\_\_\_\_ (first): \_\_\_\_\_

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#### Part 2: To be completed by the International Student Advisor

The above named student has applied to Valley Christian Academy. **Valley Christian Academy's Code: SFR214F51185000**

Please answer the following questions below and return this form to:

Director of Admission  
Valley Christian Academy  
301 W. Whyte Avenue  
Roseville, CA 95678

Phone: 916/728-5500  
Fax: 916/721-3305

Student SEVIS ID #: \_\_\_\_\_

1. The student pursued a full course of study the last semester at our institution: Yes No

2. What were the student's dates of attendance? \_\_\_\_\_

3. The student is eligible to transfer to Valley Christian Academy?: Yes No  
**RTI Release Date:** \_\_\_\_\_

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**I certify that the preceding is correct.**

Signature of School Official: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail: \_\_\_\_\_