

The University of Akron
School Code: CLE214F00500000

Transfer-In Form

(For international students accepted to UA and transferring their I-20 from current U.S. Institution to UA)

SECTION 1. Personal Information *(To be completed by the student)*

Name (Last, First, Middle)

Date of Birth (MM/DD/YYYY)

UA ID# (if known)

Your Current Mailing Address

Local Phone Number

E-mail Address

School you are now attending or the one most recently attended

Do you intent to leave the U.S. prior to attending the University of Akron? (Yes/No)

5. Employment/Training

The student has participated in the Curricular Practical Training:

Program _____ Beginning date _____ Ending date _____

The student has participated in the Optional Practical Training:

Program _____ Beginning date _____ Ending date _____