



---

## Transfer Clearance Form

To be completed by Transfer Student and their current International Advisor.

**Section 1:** To be completed by transfer student.

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

MCC ID: \_\_\_\_\_ Semester of Enrollment: \_\_\_\_\_

Email: \_\_\_\_\_

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

**Section 2:** to be completed by International Advisor at your current institution:

SEVIS ID#: \_\_\_\_\_ SEVIS Release Date: \_\_\_\_\_

Was student enrolled full-time? (circle one)      Yes      No

If no, why? \_\_\_\_\_

**Additional Information and/or Comments:** \_\_\_\_\_

---

---

---

---

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

Name of Institution: \_\_\_\_\_

Email: \_\_\_\_\_

P/DSO Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete this form and submit to [international-admissions@mclennan.edu](mailto:international-admissions@mclennan.edu)  
or have student submit through Applicant Status Portal

1400 College Drive, Waco, Texas 76708 • 254.299.8622 • McLennan.edu

*An Equal Opportunity Institution*