


Intensive English Language Program
TRANSFER RECOMMENDATION FORM
TO WHOM IT MAY CONCERN
FROM: Intensive English Language Program

E-MAIL: ielpapps@temple.edu
STUDENT NAME: _____ **DATE OF BIRTH:** _____

SEVIS #: _____ **TEMPLE ID:** _____

The above referenced has applied for admission to the Temple University Intensive English Language Program and has indicated that s/he is currently in the United States in Nonimmigrant Student (F1 or J1) status.

Before we make a final decision on this student’s application, we would like to receive from your confirmation of the status of her/his SEVIS record. Upon completion, please fax this document to 215-204-3892 or email to ielpapps@temple.edu .

What status does this student currently hold?	F-1	J-1
Has this student been maintaining status with your school?	Yes	No
Reason for not maintaining status:		
Is this student eligible to have her/his SEVIS record transferred in an ACTIVE status?	Yes	No
Has this student met all financial obligations to your institution?	Yes	No
Date of Late Attendance at your institution		
Date SEVIS record will be released		

Institution Name	
Name of Individual Completing This Form	
Title of Individual Completing This Form	
Signature of Individual Completing This Form	
Email Address	
Telephone Number	
Fax Number	
Date Signed	

Thank you for your assistance in this matter.