International Readmissions Form Return to: Director of International Student Services



Dragon ID:				
Name: Social Security #:				
Permanent Address:	City	State	Zip	
Local Address: Street		State	Zip	
Permanent phone: Local phone	·	·		
State Residency:	How long have you lived there:	years	months	
e-mail:				
1. Semester returning:	Summer Year starting			
I have attended the following institutions and will arrange from ALL schools I have attended including any sc	•	•	·	
Institution Name:	Date	s Attended:		
Institution Name:	Date	Dates Attended:		
Please have official transcript(s) sent to: Interna	ational Student Services, MSUM CMU	229, 1104 7 th Ave S, Moorl	head, MN 56563	
I now hold a □ AA □ BA □ BS □ BFA □ E	BM □BSW □BSN □MA □MS	□ MFA □ MLA □ Spc.		
Name of Institution				
3. Check the statement describing your academic pr	ogram at MSU Moorhead.			
☐ Seeking Bachelor's degree. Major		teaching	□ non-teaching	
Other:				
4. SEVIS Relase Form from:			·	
 Please read the following conditions that apply to y I certify that I have provided all information as of I understand that transfer credits not reported to institution, if unreported, is cause for cancellation. 	completely and accurately as possible perfore readmission may be disallowed		on at another	
Signature		Date		

The information collected is used for summary reports required by Federal and State laws and for MSUM institutional research. Refusal to provide any of the requested information will not subject you to adverse treatment. Submission of this information is volun tary.

All documents must be submitted at least 30 days prior to registration for the term desired Transfer Form & Bank Statement