Mentor Language Institute
Westwood

10880 Wilshire Blvd., Suite 122. Los Angeles, CA 90024
Tel: (310) 887-0777   **Fax: (310) 593-2499**   Email: info@mliesl.edu

INS School File Number: LOS214F19660000

NOTICE OF INTENT TO TRANSFER

Dear **Applicant:**

All students who are currently on an F-1 visa and wish to transfer to **Mentor Language Institute** - **Westwood** (MLI) must have this status verification form completed by the institution you were last authorized to attend.

Name: _____, _____ _____
                          Last   First   Middle

SEVIS #: _____ **Birth Date:** _____/_____/_____
                                                    Month /   Date /   Year

I intend to attend MLI on (starting date): _____/_____/_____
                                       Month /   Date /   Year

My current USA Address: _____
                      Number   Street   Apartment #

_____
           City   State   Zip Code

Phone : (_____)_____ **Email:** _____

By signing this form, I am acknowledging my intention to attend MLI. I also give permission for my former school to re-lease any needed information from my files.

_____ _____/_____/_____
           Applicant Signature   Month /   Date /   Year

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*Dear **International Student Advisor:***

This is to verify that the above named student has applied for admission to MLI. Your cooperation is highly appreciated. Please provide the following information and release the student to Mentor Language Institute - Westwood (LOS214F19660000) **after MLI has issued the Acceptance Letter.**

Name of Institution: _____

Institution's Address: _____
                      Number   Street   Suite #

_____
           City   State   Zip Code

Phone : (_____)_____ **Fax:** _____

Designated School Official's Name: _____

DSO's Title: ☐   ☐ _____ **DSO's E-mail:** _____

Student's Status: In Status   Not in Status   If "Not," please provide an explanation: _____

_____

Dates of current session or last session attended — from: _____/_____/_____ to _____/_____/_____
                                                                   Month / Date / Year   Month / Date / Year

Anticipated last day of attendance: _____/_____/_____ **SEVIS release date:** _____/_____/_____
                                              Month / Date / Year   Month / Date / Year

Comments: _____

_____

_____ _____/_____/_____ _____
     Designated School Official's Signature   Month /   Date /   Year   Official Seal / Stamp