



CHRISTIAN CENTRAL ACADEMY

K-12 College Preparatory School

Dr. Stuart Chen, Interim Head of School

Member of
Association of Christian Schools International (ACSI)

Accredited by
Middle States Association of Colleges and Schools (MSA)

I-20 School Transfer Form - Student Section

Student Name: _____
(Family Name) (Given Name) (American Name)

I authorize my current International Advisor to verify the above information and to provide the additional information requested below to Christian Central Academy:

(Signature) (Date)

I-20 School Transfer Form - International Advisor Section

The student named above has notified us of his/her intent to transfer to Christian Central Academy located at 39 Academy Street in Williamsville, New York. Please answer the following questions so that we may complete the transfer process:

Student Name: _____
(Family Name) (Given Name) (American Name)

Dates of Attendance at your School: Starting Date: _____ Ending Date: _____

____ Student is NOT in status for the following reason: _____
____ Student is in status according to immigration regulations and eligible for transfer.

SEVIS release date: _____ SEVIS School Code: _____

(Signature of International Advisor) (Printed Name) (Date)

(Name of School) (Phone Number)

(Street Address, City, State, Zip Code)

Please scan and email this completed form to:

Lynnette Wrigglesworth, ISP Coordinator
Email: lwrigglesworth@christianca.com
Phone: 716-634-4821 x 401
SEVIS School Code: BUF214F51972000