

TRANSFER OUT REQUEST FOR F-1 STUDENTS

Disclaimer: PUC OISS has prepared this form to provide you with general guidance. However, any advice provided to you by our office, as well as the information in this document, should not be construed as legal advice. PUC international staff will provide regulatory and practice information as it stands at the time of the consult. Due to the fluid nature of governmental interpretation, individuals must understand that the US Citizenship and Immigration Services (USCIS) office may change its interpretation of established immigration laws/regulations and eligibility requirements for benefits at any time. For legal advice, you may consult with an immigration attorney.

This form is to be completed by international students in F-1 status who wish to have their SEVIS record transferred from Pacific Union College to another U.S. SEVP-approved educational institution.

SECTION 1: Completed by International Student

Name: _____ Date: _____
Last/Family Name First/Given Name Middle

SEVIS ID number: _____

Email address: _____ Cell phone number: _____

To transfer from PUC to another school in the U.S. (U.S. SEVP-approved educational institution), the student must first apply and be accepted to the new school. After receiving acceptance, this completed Transfer Out Request form is to be submitted along with written confirmation of acceptance at the new school. Only one school is to be designated to transfer the SEVIS record. The "release date" is the date that PUC loses access to the student's SEVIS record and the new school gains access to the SEVIS record. This date should be at the end of the student's final enrolled quarter at PUC. Students can discuss the release date with their international student advisor. Note: after the release date has arrived, PUC will no longer have access to the student's SEVIS record, so request a transfer only after school plans are certain. Also note that travel outside the U.S. or work on campus using a PUC I-20 form after the release date has arrived is not permitted. The student is responsible for contacting the new school to arrange receipt of the new Form I-20 (the student must begin new program within five months of transfer or previous program completion date, whichever is earlier).

Transfer school name: _____

Last day of studies at PUC: _____ SEVIS release date: _____

On the SEVIS release date:

1. PUC will no longer have access to your record to make any changes.
2. On-campus jobs and OPT end.
3. The new school will be able to issue a new Form I-20 for you.

Do you need a transfer release date before the end of the current quarter? ____ Yes ____ No

If "yes", please indicate reason for early release date. Please attach documentation (such as an acceptance letter showing that you must report to your new school before the end of your current quarter at PUC) which supports your reason. Reason: _____

I hereby confirm that:

1. I have maintained valid F-1 visa status since my arrival at PUC.
2. I am not enrolled in any future classes at PUC.

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I understand the rules stated above and request my SEVIS record be released to the school indicated above. I will contact PUC's international student advisor prior to the SEVIS release date if I decide not to transfer to the institution listed above. I also understand that a SEVIS release date earlier than my current OPT expiration date will cancel OPT employment authorization, even if the EAD card is not yet expired. I authorize PUC to verify the above information and to provide the school I am transferring to with this additional information, if requested.

Signature: _____ Date: _____

SECTION 2: Completed by DSO (International Student Advisor or School Official) at transfer-in school

We understand that _____ has been accepted to your institution. Please complete the section below and fax the completed form to the number indicated below. Thank you.

Name of institution as it appears in SEVIS: _____

SEVIS school code: _____

Address: _____

Telephone number: _____ Fax: _____

Student's program start date: _____

Name of DSO/school official and title: _____

Signature: _____ Date: _____