

TRANSFER IN REQUEST FOR F-1 STUDENTS

SECTION 1: Completed by Student

Student's Name: _____ Birth Date: _____
Last/Family Name First/Given Name Middle Month /Day /Year

Student's Email: _____ Student's Phone Number: _____ PUC ID#: _____

SEVIS ID#: _____ New Student for: Fall ___ Winter ___ Spring ___ Summer ___ (Quarter)

Please sign the release of information statement and give this form to the international student advisor at the school you now attend or most recently attended.

I hereby request and authorize the release of the information on this form and my SEVIS record to Pacific Union College.

Signature: _____ Date: _____

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

To Designated School Official: We request confirmation of the above named student's status prior to processing a transfer.

The above student is eligible for a transfer from your institution? Yes No

If no, please explain: _____

Student's SEVIS ID#: _____ SEVIS Transfer Release Date: _____

I-20 Expiration Date: _____ Date of last attendance: _____

Please check appropriate statement:

- This student is in good standing and is/has been pursuing a full course of study (enrolled full-time), or has already been reinstated to status by USCIS, and is eligible for transfer to Pacific Union College.
- Indicate any reinstatement and date: _____
- Out-of-status. Student was last enrolled on: _____
- Authorized Practical Training: CPT OPT Dates: _____ to _____ For which academic level? _____
- Indicate any reduced course load and date: _____
- Other/Notes: _____

Name of institution: _____

Address: _____

Telephone number: _____ Fax: _____

Name and title of DSO/school official completing this form: _____

Signature: _____ Date: _____

Release to: Pacific Union College, School Code: **SFR214F00598000** within 60 days of student's program completion date.

Note: Please **DO NOT** transfer the SEVIS record to Pacific Union College if it is more than 5 months from the last date of attendance/OPT at your institution to the applicable quarter start date of Pacific Union College.

Fax completed form or scan and email to: (707) 965-7386 or isa@puc.edu