

Transfer OUT – SEVIS Release Form

Transferring your SEVIS (immigration) record and academic record to a new school are two separate processes. As an F-1 visa holder you have a SEVIS record and only one U.S. institution has access to it at any time. If you plan to transfer **from UMSL to another school**, or if you are currently on **Optional Practical Training (OPT)** you must complete this form to confirm with ISSS that you have been fully admitted to the new school and are prepared to have your SEVIS record released to them. Upon receipt of this release form, we will update your SEVIS record, giving the new school access to your record. You may be applying to many schools, but your SEVIS record can only be transferred to ONE school. Once we transfer your record out to the school listed below, we CANNOT retrieve it after the release date, and you will have to contact that school to determine their transfer policies. Your transfer release date will be the end of the current semester unless otherwise requested for a valid reason.

The new school cannot issue you an I-20 until your SEVIS record is transferred.

ATTACH: **New School Admission Letter (copy)** **Transfer forms from new school**

Name: _____ **Triton ID#:** _____ **Phone#:** _____
FAMILY/LAST NAME Given/First Name(s)

UMSL Email address: _____ @mail.umsl.edu **Program end date** on your I-20 or DS-2019? _____
(MM/DD/YYYY)

Did you complete the degree program listed on your current I-20 or DS-2019? **YES** **NO**

Last semester you enrolled in or completed at UMSL? Fall _____ Spring _____ Summer _____ Never attended UMSL
(YYYY) (YYYY) (YYYY)

Are you currently on OPT or Academic Training? (*SEVIS transfer date will end ANY work authorization*) **NO** **YES** Last day of work: _____
(MM/DD/YYYY)

Are you currently in good F-1 or J-1 status? **YES** **NO** If no, please explain:

Are you eligible to continue at UMSL? **YES** **NO** If no, please explain: _____

Name of the institution you are transferring to: _____ Phone# _____

Address: _____
(Contact information for the equivalent of International Office on your new campus)

SEVIS Campus Code of your new institution (provided by admissions/International Office at the new institution): _____

Term of admission at your transfer institution: Fall _____ Spring _____ Summer _____
(YYYY) (YYYY) (YYYY)

Transfer release date: _____ Are you leaving the US during this transfer process? **NO** **YES**
(Usually the end date of current semester)

If yes, what are dates of your travel: _____
(MM/DD/YYYY)

Reason for Transferring:
 (Your feedback helps us make positive changes, and will not be used against you in any way)

- Starting a new level of program (ex. Bachelors to Masters)
- Location
- Quality or difficulty of program
- Financial difficulties/Scholarships
- Other (Please briefly explain)

Continued:

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Student Acknowledgement Statement:

My signature below confirms that:

1. _____ I request and give my permission for the University of Missouri-St. Louis to release any necessary information to determine my eligibility for transfer as addressed by 8CFR214.2(f)(8) to the institution indicated on this form.
2. _____ I understand that the release of my SEVIS record cancels any on-campus or off-campus employment authorization issued by UMSL. I understand that I CANNOT continue to work on the UMSL campus after the transfer release date.
3. _____ All outstanding bills at UMSL must be paid. Contact the Cashier’s office with questions.
4. _____ I am responsible for making sure all my classes are dropped. Contact your academic department for instructions. If I do not drop these courses, I will be billed and I am expected to submit payment.
5. _____ I will notify Housing & Dining or my landlord of your plans to leave UMSL.
6. _____ I must begin my studies within five months of ceasing your studies at UMSL or within five months of the expiration date of my EAD card if I am currently participating in OPT (Optional Practical Training).
7. _____ I understand ISSS must release your SEVIS record to the new institution no later than 60 days from the completion of your studies or the expiration of your EAD card.
8. _____ If on OPT, I understand that my OPT will be terminated on the release date and I can no longer work after that date.
9. _____ I understand that if I change my mind about transferring, I must contact the ISSS immediately to cancel this request.
10. _____ I understand that ON or AFTER the release date, I cannot change this request in any way.

Student Signature: _____ Date: _____

F-1 SEVIS TRANSFER TIMELINE



J-1 SEVIS TRANSFER TIMELINE



For Office Use only:

Transfer Release Date: _____ Transfer completed in SEVIS: _____ DSO Initials: _____

Comments: _____