

Name and Title of School Official

## International Student School Transfer Eligibility Form – Transfer In

(To be filled out by school within the United States only)

Date

Seattle University cannot issue an I-20/DS-2019 until your current school releases your SEVIS record to us. Please contact the international student advisor at your current school and notify them of your intent to transfer. Student must complete Section I and the current school complete Part II. This should be done during the **final term** at your current school.

## PLEASE TYPE OR PRINT Seattle University SEVIS School Code: SEA214F25900000 First quarter and year at Seattle University (check quarter) ☐ Spring (March) \_\_\_ ☐ Fall (September) ☐ Winter (January) ☐ Summer (June) PART I: STUDENT SECTION Family Name First Name Middle Name Birthdate (mm/dd/yyyy) SU ID Current Address Phone Number Will you be traveling out of the US prior to starting at Seattle University? Yes Return Date to the US: I authorize the individual completing this form to release the following information for the purpose of verifying my eligibility to transfer. Student Signature: PART II: CURRENT SCHOOL'S ADVISOR (DSO) SECTION Has this student pursued a full-time course of study at your institution? □ Yes $\square$ No Dates of attendance at your institution: ..... Last vacation term: ..... Did the student maintain their non-immigrant status? □ Yes $\square$ No Is the student's SEVIS record currently active? □ Yes $\square$ No Has this student requested for their release to Seattle University? □ Yes $\square$ No If yes, SEVIS ID #: SEVIS release date: SEVIS release date: (Please release SEVIS record to: SEA214F25900000 Seattle University) Any authorized period(s) of practical training? □ Yes $\square$ No If yes, please note period(s) and type of practical training authorized (you may also use this space for additional comments). Name of School Telephone Fmail

Signature of School Official