



Request to Transfer-Out SEVIS Record

If you plan to transfer from Western Michigan University to another US school, you must use this form to notify WMU of your intent to transfer and to indicate which school you intend to transfer. *For F-1 students on post-completion OPT, the course of study must begin within five months of the end of OPT or the transfer release date, whichever is earlier.*

Please note that the transfer-in school will not be able to issue you a new SEVIS Form I-20/DS-2019 until the transfer release date. If you decide to cancel the school transfer, you must notify International Student and Scholar Services (I3S) **before** your transfer release date (once the transfer release date has been reached, WMU will no longer have access to your SEVIS record).

Before you leave WMU, be sure to take care of any financial obligations to the university, drop classes, cancel your health insurance, and notify your department and/or academic advisor of your departure.

****Any employment authorization ends upon transfer-out or non-enrollment.**

Items needed when submitting this form:

- * Copy of the acceptance letter issued by the university admissions office (not department) from the transfer-in school (**must indicate admission date**)
- * Copy of I-20(s)/DS-2019(s)
- * Copy of passport, visa, I-94 arrival/departure record
- * Copy of OPT card (if applicable)

Student Information:

_____	_____
Last Name	First Name
_____	_____
Date of Birth (MM/DD/YYYY)	City of Birth
_____	_____
Email Address	Phone Number
_____	_____
Major	Department/College
_____	_____
SEVIS Number	WIN

Visa Type: F-1 J-1 **Education Level:** CELCIS student Undergraduate Graduate

Transfer-In School Information: (must be completed)

_____	_____
Full Name of School	School SEVIS Code/Program Code
_____	_____
City	State
_____	_____
_____	Phone Number

I request that my SEVIS record be transferred to the new school on the following date: _____

Reason for Transferring: _____

I certify that I have complied with US immigration regulations and I will timely inform I3S prior to the SEVIS release date if I decide not to transfer out.

_____	_____
Student Signature	Date

DSO/ARO Signature: _____ Date: _____

Updated in:	<input type="checkbox"/> SEVIS _____	<input type="checkbox"/> ISSM _____
	Date Completed	Date Completed
	<input type="checkbox"/> Banner _____	<input type="checkbox"/> Copies to: _____
	Date Completed	