

F-1/J-1 TRANSFER RELEASE

Family/Last Name: _____ Given/First name: _____

PID: _____ OHIO E-mail: _____

YOU MUST MEET WITH AN ISFS ADVISOR TO DISCUSS THE TRANSFER PROCESS BEFORE COMPLETING AND SUBMITTING THIS FORM.

I am requesting that my SEVIS record be released for transfer to the school listed below. I understand that:

- I will need to maintain my F-1 status by attending the new school;
- I need to contact my new school immediately to obtain a new I-20 to attend that school;
- If I do not complete the transfer to my new school, I will be out of status and need to apply for reinstatement to F-1 status;
- Any authorized OPT will be cancelled effective the day I start my new program of study.

Complete name of school transferring to: _____

- A copy of the admission letter to the school must accompany this form.

SEVIS school code/program code (required – contact new school for code): _____

Release date requested: _____

*The **release date** is the date when your SEVIS record will be transferred to your new school. When your record is transferred to the new school, you will need to maintain your status at the new school. You will not be able to receive your new I-20 until **AFTER** the release date.*

*Your **release date** should be:*

- *The end date of the current term if you are currently enrolled at OU*
- *The end date of your OPT if you are authorized for post-completion OPT*

TRAVEL: *If you will be travelling outside of the United States after completing your program at Ohio University but before beginning your program at your new institution YOU MUST contact the new institution for further instructions.*

*If you have questions about determining your **release date**, please speak with an ISFS advisor. **NOTE: This form must be submitted to ISFS at least two weeks prior to the release date requested.***

Student signature: _____ Date: _____
(Month/Day/Year)

FOR ISFS USE ONLY

SEVIS release date: _____ SEVIS/FSA/PS update: Y or N Advisor/Date: _____

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OHIO
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International Student and Faculty Services • Walter International Education Center

15 Park Place • Athens, OH 45701 • 740.593.4330 • 740.593.4328 (fax) • www.ohio.edu/isfs