

## TRANSFER STATUS VERIFICATION FORM

Congratulations on your acceptance to East Tennessee State University. In order to process the transfer of your SEVIS record from your current school to ETSU, and issue you a new I-20, the DSO at your present school must complete and return this form to us as soon as possible.

Please read the following F-1 regulations regarding the transfer of schools before completing Part A of the transfer form. Feel free to contact our office if you have any questions.

### 8 C.F.R. 214.2 (f) (8)

#### *(8) School transfer eligibility.*

(i) A student who is maintaining status may transfer to another Service approved school by following the notification procedure prescribed in paragraph (f) (8) (ii) of this section. However, an F-1 student is not permitted to remain in the United States when transferring between schools or programs unless the student will begin classes at the transfer school or program within 5 months of transferring out of the current school or within 5 months of the program completion date on his or her current Form I-20, whichever is earlier. In the case of an F-1 student authorized to engage in post-completion optional practical training (OPT), the student must be able resume classes within 5 months of transferring out of the school that recommended OPT or the date the OPT authorization ends, whichever is earlier. An F-1 student who was not pursuing a full course of study at the school he or she was last authorized to attend is ineligible for school transfer and must apply for reinstatement under the provisions of paragraph (f) (16) of this section, or, in the alternative, may depart the country and return as an initial entry in a new F-1 nonimmigrant status.

(ii) *Transfer procedure.* To transfer schools, an F-1 student must first notify the school he or she is attending of the intent to transfer, then obtain a Form I-20, issued in accordance with the provisions of 8 C.F.R. 214.3 (k), from the school to which he or she intends to transfer. The transfer will be affected only if the F-1 student completes the Student Certification portion of the Form I-20 and returns the form to a designated school official on campus within 15 days of beginning attendance at the new school.

**If you have a reinstatement application pending, please provide your receipt number:**

**Please submit your I-20 Request online: See [our website](#) for details and Ms. Noble's email for instructions and link.**

### **Traveling Outside the United States Before Transfer:**

If you plan to travel outside the United States during the transition period between your leaving your old school and enrolling at ETSU, you will need your new I-20, issued by ETSU, to reenter the United States.

ETSU School Code: NOL214F10177000

## TRANSFER STATUS VERIFICATION FORM

### SECTION A (To be completed by student)

I hereby authorize my present International Student Advisor (or equivalent campus officer) to provide the following information as part of my application for admission to East Tennessee State University.

#### Student Information

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Date you expect to enroll at ETSU: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
.....

### SECTION B (To be completed by the DSO then email or fax to the address below)

Student's SEVIS ID: \_\_\_\_\_

Student's date of initial entry to the U.S.: \_\_\_\_\_

Student's date of last attendance at your school: \_\_\_\_\_

SEVIS release date: \_\_\_\_\_

#### Please check one:

To the best of my knowledge, this student is in status and IS eligible to transfer to ETSU.

To the best of my knowledge, this student is out of status and NOT eligible to transfer to ETSU.

If student is out of status, has a reinstatement petition been filed? Yes No

Did the student complete a degree program during his/her attendance at your school? Yes No

Degree Level: \_\_\_\_\_ Major: \_\_\_\_\_ Date completed, (if applicable): \_\_\_\_\_

Has the student been approved for any OPT/CPT? Yes No

If yes, please list all dates: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ School Name: \_\_\_\_\_

School Address: : \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PLEASE EMAIL OR FAX THE COMPLETED FORM TO:

Melissa Noble

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