



**F-1 SEVIS
Transfer-In
Release Form**

**OFFICE OF GRADUATE STUDIES
International Student Services Division**

STUDENT INFORMATION: (to be completed by student)

Name: _____
Last (Family Name) First Middle

Date of Birth (mm/dd/yyyy): _____ Current School: _____

Admission Semester Applying for: Fall Spring Summer Year: 20_____

SEVIS INFORMATION: (to be completed by DSO at current school)

The above-mentioned student intends to transfer his/her immigration record to Alcorn State University. In SEVIS. Please provide the following information about the student's status.

Name of Institution: _____

Last semester enrolled: _____ SEVIS transfer release date: _____

1. This student is currently in status with Immigration & Naturalization Service Yes No

If the student is out of status:

- A reinstatement to student status is pending
 Student has been advised that a reinstatement is required

2. This student is eligible for school transfer in the U.S. Yes No

3. If the student is on the F-1 visa, please provide the SEVIS number. _____

4. Total amount of practical training time used to date. Please provide the dates and types.
Curricular (Internships, etc.) _____
Optional Practical Training (Postgraduate) _____

5. If the student holds a J-1 visa, please complete:
Sponsor _____ Program Number _____
Does the student have the sponsor's permission to transfer? Yes No
Please attach a copy of the current IAP-66 form.

6. What is the effective transfer date? _____

Name of Designated School Official: _____

Title: _____

Telephone number: _____ Email address: _____

Signature: _____ Date: _____