



SEVIS Transfer-Out Request for F-1 Students

For students transferring from American University to another US educational institution

Please attach to this form: *Your New School Acceptance Letter and Your New School Transfer-in Form (if applicable)*.
Return all to AU's International Student and Scholar Services (ISSS) office.

Student's Name: _____ AU ID#: _____

SEVIS #: _____ I-20 Start Date: _____ I-20 End Date: _____

E-mail: _____ Phone #: _____ Are you currently working? YES NO

If working, what is your current work authorization? On-campus CPT OPT Inter.Org.

Last day of enrollment at AU: _____

SEVIS Release Date Information:

Transferring out students must select the date they would like to have their SEVIS record released to the new institution:

- Students who have NOT graduated – the release date is usually the semester end date
- Students who have graduated – the release date must be before the end of your 60-day grace period
- Students on post-completion OPT – the release date must be before the end of your 60-day grace period

Students should also consider travel and additional plans when selecting the release date. If traveling after the release date, students must re-enter the US using the new school I-20.

Statement of Understanding: *I understand that:*

1. My status as an F-1 student at American University will end on the release date of my electronic SEVIS record to the new school. On the release date, the responsibility for my SEVIS record transfers to my new school.
2. The release of my record in SEVIS cannot be reversed after the release date. Therefore, if my transfer plans change, I must contact AU's International Student and Scholar Services (ISSS) office prior to the release date.
3. I must end any type of employment a day before my release date.
4. I must obtain a new I-20 from the new school as soon as possible after the release date.
5. It is my responsibility to withdraw from any future AU classes that I am enrolled in.

New School Information:

I have been admitted to (*Name of Institution*): _____

SEVIS School Code: _____

Start date of new program (*mm/dd/yy*): _____

Requested SEVIS Release Date (*mm/dd/yy*): _____

I have reviewed and understood my responsibilities and the immigration implications of transferring my SEVIS record to another school.

Student's Signature: _____ Date: _____

Advised by (ISSS Advisor's Name): _____ Date: _____

Processed by (ISSS Advisor's Name): _____ Date: _____