

**SEVIS I-20 Transfer  
To Rochester Institute of Technology**

**PART I (to be filled out by the student)**

Student's name \_\_\_\_\_  
First Name Last (Family) Name

SEVIS ID # (if available) \_\_\_\_\_

School ID or Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

OPT dates (if any) \_\_\_\_\_ to \_\_\_\_\_

Transfer Release Date \_\_\_\_\_ RIT Program Begins \_\_\_\_\_

Current U.S. Address: \_\_\_\_\_ Foreign Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Current Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

I give permission for my present school to release the information requested on this form and to release me to RIT on the above Transfer Release Date.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**PART II (to be filled out by current International Student Advisor)**

1 Is this student currently attending the school that s/he was last authorized by INS to attend? Yes \_\_\_ No \_\_\_

2 And student...

- Is currently enrolled in a full-time program, and has been enrolled since \_\_\_\_\_
- Began course of study on \_\_\_\_\_ and completed course of study on \_\_\_\_\_
- Did not complete the course of study. Last day of attendance was \_\_\_\_\_
- Did not report to this school
- Is awaiting reinstatement or change of status, SRC number, if known: \_\_\_\_\_
- OPT dates authorized by Immigration: \_\_\_\_\_ to \_\_\_\_\_
- Other: \_\_\_\_\_

3 To the best of your knowledge, is this student eligible to transfer? Yes \_\_\_ No \_\_\_

If not, please explain on the reverse side.

Signature of School DSO \_\_\_\_\_ Print Name \_\_\_\_\_

Phone Number \_\_\_\_\_ School Name \_\_\_\_\_

Date \_\_\_\_\_ [School Seal or Office Stamp]

**Advisor: Please return this form by mail to the address above, or return to student in a SEALED envelope from your institution. Unsealed forms will not be accepted.**