F-1 TRANSFER FORM

The F-1 TRANSFER FORM must be completed by international applicants who are applying to the University of Southern Indiana and ATTENDING ANOTHER SCHOOL IN THE U.S. This form is a necessary part of the application process for those attending another U.S. school (high school or university). Please give this form to the foreign student advisor at the school where you are currently enrolled. If you are not attending an institution at this time and are in the United States, this form should be completed by the foreign student advisor at the school you most recently attended. Please note: Your transfer cannot be completed until the designated school official endorses your I-20, upon your arrival at the University of Southern Indiana.

Section 1 (To be completed by applicant)

Last Name _________________________ First Name __________________________
Sevis ID # ______________________________________________________________
Signature_______________________________________________________________

You should attach to this form photocopies of:

a. Your most recent I-20 (pages 1 and 3)
b. Your I-94 (front and back). This is a small white card stapled in your passport.
c. The U.S. Visa page from your passport.
d. The identification page from your passport. (The page with your photograph.)

Section 2 (To be completed by the International Student Advisor)

1. Student status: check and complete all appropriate:
   □ Student was/is pursuing a full course of study during the _____________________
   term which ended/ends on _____________________.
   □ Student was/in not pursuing a full course of study and must apply for reinstatement.
   □ Student is in legal F-1 status.
   □ Student is not in legal F-1 status for the following reason: __________________________

2. Curricular Practical Training: list all previously authorized (check full-time or part-time):
   □ Full-time □ Part-time (from __-____-____ to __-____-____)
   □ Full-time □ Part-time (from __-____-____ to __-____-____)

3. Optional (pre-completion and post completion) Practical Training:

List kind of P.T. for what degree(s) _____________ Period of P.T. ____________ Check ? Full-time ? Part-time
Name of academic institution: ________________________ Address __________________________________________
                                                                                                         __________________________________________
Release date in SEVIS: ___________________________ SEVIS ID #: ________________________________

Name of International Student Advisor ________________________ Title ____________________________