

# SEVIS Transfer Eligibility Form

**Please Note:** This Form is for F-1 Students Transferring from another U.S Institution to Virginia International University

## Part 1: To be completed by the student:

(Please complete this portion of the form and submit it to the International Student Advisor at your current school)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(As it appears on your passport) (MM/DD/YYYY)

Program of interest at VIU: \_\_\_\_\_

Semester/ Term of admission to VIU: (Circle one) FALL SPRING SUMMER I SUMMER II / \_\_\_\_\_ (YEAR)

I request and authorize the DSO at \_\_\_\_\_ to complete **PART 2** of this form and release the information to VIU.  
(Name of the school you are currently attending)

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

## Part 2: To be completed by the Designated School Official (DSO):

**\*Please Note:** Upon completion of this document, the students' Acceptance Letter will be processed for the release of their SEVIS record.

The above named student intends to transfer to Virginia International University. Your assistance is appreciated in providing the following Information, and signing this form.

The Virginia International University SEVIS code is WAS214F01193003

SEVIS ID: N \_\_\_\_\_ I-20 End date/Expiration: \_\_\_\_/\_\_\_\_/\_\_\_\_

Dates of Full-time enrollment: \_\_\_\_/\_\_\_\_/\_\_\_\_ through \_\_\_\_/\_\_\_\_/\_\_\_\_

Date of graduation/termination of study: \_\_\_\_/\_\_\_\_/\_\_\_\_ SEVIS transfer release date: \_\_\_\_/\_\_\_\_/\_\_\_\_ or  T.B.D.

Level of study at your institution: (Circle one) LANGUAGE UNDERGRADUATE GRADUATE

Has the student met his/her financial obligations with your institution: (Circle one) YES NO

Did the student attend another US institution before yours? (Circle one) YES NO

Has the student applied for or received authorization for Off-Campus Employment: (Circle one) NO

YES- specify the type of employments: \_\_\_\_\_

Has the student acted in accordance with USCIS regulations: (Circle one) YES

NO- please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please contact the school DSO to confirm acceptance before you release any, "COMPLETED", "TERMINATED" or "CANCELED" record.

U.S Institution: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

Name and title of DSO: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

❖ Please e-mail this completed form to [admission@viu.edu](mailto:admission@viu.edu)