

This form should be completed by F-1 or J-1 students wishing to transfer from the Florida Gulf Coast University to another institution. Please read through the statements below and sign that you understand and agree to the Transfer.

- I am an F-1 Student and have complied with eligibility requirements to remain in good F-1 status at Florida Gulf Coast University.
- I have attached a copy of my current SEVIS I-20. (only if requested by GEO)
- I have been accepted to another institution of higher education in the U.S., and have attached a copy of my acceptance letter or email.
- I understand that once this form is submitted, I can only change the name of the school I am transferring to or the release date up until the release date. After that date, my SEVIS record belongs to the new school.
- I realize that once the release date is reached, the Global Engagement Office at FGCU will no longer have access to my SEVIS information.
- I understand that I cannot work at FGCU after the release date.
- I understand that I cannot register for classes at FGCU after the release date.
- I understand that I must obtain an I-20 from my new school within 60 days of my last day of class at FGCU.
- I understand that the new school cannot issue an I-20 after the release date is reached.
- I understand that I must begin full-time enrollment at the new school within 5 months of my last day of class at FGCU.
- I give permission for the DSO at FGCU to verify my status and release my electronic SEVIS record.

STUDENT INFORMATION

FGCU Eagle ID: SEVIS ID#: VISA STATUS F-1 J-1

Last/Family/Surname(s):

First & Middle Name(s):

Email: Phone Number:

U.S. Mailing Address, Street Address:

City: State: Zip Code:

Academic Program: Undergraduate Master's Major:

TRANSFER INFORMATION

I request to transfer my SEVIS record to:

Complete Name of New Institution:

- **F-1 Students:** SEVIS School Code:
- **J-1 Students:** Program Number:

Transfer Release Date: (MM/DD/YYYY) End date of OPT: New School Start Date:

Reason for transfer: (check all that apply)

- Continuing same education level at new institution Starting a new education level at the new institution Personal Reasons
- Other: _____

STUDENT CERTIFICATION

I understand and agree that FGCU release my SEVIS record to the school listed above on the requested transfer release date.

Student Signature: _____ Date: _____