



## IMMIGRATION TRANSFER

(ie, the "transfer" of your immigration file to the Immigration office having jurisdiction over ISU. This does not necessarily have any connection to an academic transfer.)

Dear Applicant to Indiana State University:

It is your responsibility to advise the International Service Office at your current school of your intent to transfer to ISU. This may be done by taking this letter with the form on the reverse side to your International Student Advisor.

Processing the transfer of your immigration file can be done in two ways:

(1) If you are leaving the United States prior to enrollment at ISU, **present the ISU I-20 for re-entry** once it has been issued to you. If you need a new visa, **present your ISU I-20**. Do **not** use your former school's I-20.

According to immigration regulations [8 CFR 214. (f) (4) (ii)] the name of the new school (ISU in this case) **does not** have to be indicated on your visa to allow you re-entry to the US.

(2) If you are coming to ISU **without** leaving the United States, bring to the Office of International Programs and Services your passport and I-94 card as soon as you arrive on campus. (If you have dependents you should bring their passports and I-94 cards)

### To issue your I-20 form we must have:

- Your SEVIS record released to Indiana State University.
- The Transfer Form (on reverse) completed by your International Student Advisor.
- Required financial documents.

**THE STUDENT MUST PRESENT THE TRANSFER SEVIS I-20 TO THE RECEIVING SCHOOL'S DSO  
"WITHIN 15 DAYS OF THE PROGRAM START DATE LISTED ON FORM I-20."**

If you have any questions about your immigration transfer to ISU, please contact us at (812) 237-2440.

## TRANSFER TO ISU FORM

Please complete SECTION I and have your current International Student Advisor complete SECTION II.

The completed form should be returned by mail or fax to:

Office of International Programs and Services  
218 N. 6<sup>th</sup> St., Erickson Hall Room 611  
Terre Haute, IN 47809  
Fax: (812) 237-3602

### SECTION I (to be completed by the applicant)

Student name \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Country of Citizenship: \_\_\_\_\_ ID # \_\_\_-\_\_\_-\_\_\_

Phone Number: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

I hereby grant permission for the Designated School Official at the school I am currently authorized to attend, to release information regarding my enrollment at that institution

Student signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

\*\*\*\*\*SEND/GIVE TO YOUR CURRENT INTERNATIONAL STUDENT ADVISOR\*\*\*\*\*

### SECTION II (to be completed by the Designated School Official)

Dates of the student's last attendance: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Type of visa: F-1\_\_\_\_, J-1\_\_\_\_, other \_\_\_\_\_

Date of expiration of I-20 \_\_\_\_\_; of DS-2019 \_\_\_\_\_; other \_\_\_\_\_ I-94 number: \_\_\_\_\_

SEVIS ID: \_\_\_\_\_ Release date: \_\_\_\_\_

The student is \_\_\_/ or is not \_\_\_ in status. If not in status, was an application for reinstatement made? Yes \_\_\_ No \_\_\_

Has the student shown any financial difficulties? Yes \_\_\_ No \_\_\_

Has the student completed any authorized period(s) of Practical Training? Yes \_\_\_ No \_\_\_

Dates of Practical Training \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Type: \_\_\_\_\_

Name of Institution \_\_\_\_\_ Address of Institution \_\_\_\_\_

\_\_\_\_\_ Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Name and title of DSO signing this document

Signature of DSO \_\_\_\_\_

Date \_\_\_/\_\_\_/\_\_\_