UCLA - Dashew Center for International Students and Scholars

F-1 SEVIS TRANSFER OUT REQUEST

Student's Name: _____
Last Name First Name

UCLA ID#: _____ Major: _____

E-Mail: _____ Telephone #: _____

Degree Objective: ☐ Bachelor's ☐ Master's ☐ Doctorate

When was your last enrollment term at UCLA? _____

Are you currently on post-completion Optional Practical Training (OPT)? ☐ YES ☐ NO

If **Yes**, when is your last date of employment? _____

NEW SCHOOL INFORMATION

Must submit your admission/acceptance letter to the new school.

New School Name: _____

Address: _____

_____

New School SEVIS Code: ____ ____ ____ **214F** ____ ____ ____ ____ ____ ____ ____ ____

SEVIS RELEASE DATE: _____ UCLA SEVIS ID #: N_____
(Date your SEVIS record will be released to new school)

I am aware that after the release date of my SEVIS record to the school listed above, changes CANNOT be made by UCLA and I cannot travel or work using a UCLA I-20. I certify that the information above is true and correct to the best of my knowledge.

Student's Signature**:** _____ Date**:** _____

FOR OFFICE USE ONLY	***INIT:*** _____ ***DATE:*** _____
	☐ **Restriction Holds** ☐ **Current Enrollment** ☐ **Past Enrollment** ☐ **Current I-20**