Transfer Clearance Form for International Transfer Students

As part of the admission process at the University of Georgia, the certificate below must be completed by your present international student advisor. This form is to be used by F-1 or J-1 students currently studying in the United States at another institution. Please complete the permission statement below and send to your current, or former, international student advisor. Please have this form completed and returned to us by the SEVIS release date that your advisor has indicated below.

Print Name: __________________________________________
(Family name)                                            (First name)

Date of Birth: ___________________  Permanent email address: ___________________
(Day/Month/Year)

I plan to start my program (indicate year in the blank):
Fall________  Spring________  Summer________

If you have changed or will change your mailing address in the near future, inform the Undergraduate Admissions office by sending an email message with the new address to admproc@uga.edu. This will assure your new I-20 will go to the proper location.

I grant permission for the information requested below to be released to the University of Georgia.

________________________________________
Applicant’s Signature

________________________________________
Date
To: USCIS Designated School Official

This section must be completed by a Designated School Official (DSO) at the student’s current or former school. Please do not transfer the student’s SEVIS record to our office without confirming official acceptance.

End Date of current I-20: ________________ or End date of OPT: __________________________

Student Immigration Status (check one):

☐ This student is in status and eligible to transfer according to 8 CFR 214.2(f)(8)(i)

☐ This student is out of status. SEVIS Termination Date: ________________
   Reinstatement filed on: ________________

☐ This student is out of status. No reinstatement has been filed.

Date of last attendance at your school: __________________________________________________

SEVIS ID # _______________________ SEVIS Release Date _____________________________

DSO Printed name and title: __________________________________________________________

DSO Signature: ______________________________________________________ Date: ___________

Name of Institution: ______________________________________________________________

Address: ________________________________________________________________________

Phone: ___________________________________________________________________ Email: ________________________________

Please return this form via email, postal mail or fax to:

Jennifer Buriles – jburiles@uga.edu
The University of Georgia, Office of International Education
1324 S. Lumpkin Street, Athens, GA 30602
Phone: (706) 542-6119 Fax: (706-583-0123)