



# SEATTLE UNIVERSITY

## International Student School Transfer Eligibility Form – Transfer In

(To be filled out by school within the United States only)

Seattle University cannot issue an I-20/DS-2019 until your current school releases your SEVIS record to us. Please contact the international student advisor at your current school and notify them of your intent to transfer. Student must complete Section I and the current school complete Part II. This should be done during the **final term** at your current school.

PLEASE TYPE OR PRINT

Seattle University SEVIS School Code: SEA214F25900000

### First quarter and year at Seattle University (check quarter)

Fall (September) \_\_\_\_\_  Winter (January) \_\_\_\_\_  Spring (March) \_\_\_\_\_  Summer (June) \_\_\_\_\_

### PART I: STUDENT SECTION

.....  
 Family Name                                      First Name                                      Middle Name                                      Birthdate (mm/dd/yyyy)  
 .....  
 Current Address                                      SU ID                                      Phone Number

Will you be traveling out of the US prior to starting at Seattle University?  Yes Return Date to the US: \_\_\_\_\_  No  
I authorize the individual completing this form to release the following information for the purpose of verifying my eligibility to transfer.

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

### PART II: CURRENT SCHOOL'S ADVISOR (DSO) SECTION

Has this student pursued a full-time course of study at your institution?  Yes  No

Dates of attendance at your institution: ..... Last vacation term: .....

Did the student maintain their non-immigrant status?  Yes  No

Is the student's SEVIS record currently active?  Yes  No

Has this student requested for their release to Seattle University?  Yes  No

If yes, SEVIS ID #: ..... SEVIS release date: .....  
(Please release SEVIS record to: SEA214F25900000 Seattle University)

Any authorized period(s) of practical training?  Yes  No

If yes, please note period(s) and type of practical training authorized (you may also use this space for additional comments).

.....  
 Name of School                                      Telephone                                      Email

.....  
 Name and Title of School Official                                      Signature of School Official                                      Date

Please email this form to:  
Seattle University, International Student Center  
isc@seattleu.edu