

Complete this form if you are currently attending another U.S. educational institution in F-1 or J-1 status. Please ask as international student adviser at your current school to complete part II of this form. The adviser should then email the completed form, along with a copy of your I-20 or DS-2019, to iss@missouri.edu using the subject line "transfer in form." For instructions on SEVIS transfer, go to international.missouri.edu/transfer-instructions.

PART I: TO BE COMPLETED BY STUDENT

Name: _____
last (family) first (given)

Address: _____
street address city state zip code

Frequently used email address: _____

Phone: _____ Current visa status: F-1 J-1

Semester you intend to enroll at MU: _____ Degree level at MU: bachelor's master's Ph.D.

Do you plan to travel outside the U.S. before beginning your program at MU?

- Yes: I request a "transfer pending" I-20 from MU to use when I re-enter the U.S.
- No: I will pick up my I-20 from the International Center upon arrival at MU.

I hereby give permission for the information below to be released to the University of Missouri in Columbia.

Signature: _____ Date: _____

PART II: TO BE COMPLETED BY INTERNATIONAL STUDENT ADVISER AT CURRENT SCHOOL

SEVIS ID#: _____ Transfer release date: _____
release to KAN214F00635000

Student's program of study at your school: bachelor's master's Ph.D. Other: _____

Dates student attended your school: start date: _____ end date: _____

Has the student had an authorized reduced course load? yes no

If yes, state the type(s) and dates of authorization: _____

Has the student been authorized for practical/academic training? yes no

If yes, state the type(s), full-time/part-time, degree level and dates of authorization:

Is student in valid F-1/J-1 status? yes no (If no, has a reinstatement application been filed? yes no)

Additional comments regarding student: _____

The information provided on the above-named student is accurate and true to the best of my knowledge.

Signature: _____ Date: _____

Printed name: _____ Title: _____

College/university name: _____

City/state: _____ Email: _____