



F-1 SEVIS TRANSFER FORM

Students with an existing F-1 visa: This form must be completed upon your admission to Dickinson College by the advisor who acts as your Designated School Official (DSO) at your current institution and return to: Dickinson College Center for Global Student and Engagement, Attention: International Services, E-mail: intl@dickinson.edu, in order to approve transfer of your SEVIS (immigration) record to Dickinson College. Along with this form, you should provide your advisor with your acceptance notice from Dickinson.

I request and authorize my current DSO to provide the information below to Dickinson College.

(Student name in full - Please Print)

(Student signature)

(Date)

To be completed by Designated School Official:

NOTES: Although the release date of the SEVIS record should occur after the end of the student's current program, the release can be scheduled in advance to automatically transfer on the release date. You can continue to edit the student's SEVIS record until the scheduled release date. Dickinson will not be able to access the student's SEVIS record until the release date. In order to expedite the student's application, we respectfully ask you to schedule the transfer and complete this form at your earliest convenience. The student should provide you with proof of admission to Dickinson. If you are unsure how to schedule the transfer in SEVIS, please do not hesitate to contact Dickinson's Coordinator for International Services at intl@dickinson.edu or 717-245-1341. Please scan and email this completed form to intl@dickinson.edu.

In SEVIS, Dickinson is listed as: **PHI214F00294000 Dickinson College**

Student's SEVIS ID: _____

Current immigration status:

___ The student is in good standing and is/has been pursuing a full course of study (or has already been reinstated) and is eligible to transfer.

___ The student is out of status and a reinstatement to student status was filed on _____.

___ Other: _____

Date of last attendance at your school: _____

Scheduled SEVIS Release date: _____

(Name & Title of school official completing this form)

(Phone Number)

(Email Address)

(Name of institution)

(Address)

(Signature)

(Date)