

**Transfer Request Form**

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Date: \_\_\_\_\_

Dear International Student Adviser:

I hereby authorize the release of my immigration information to the following educational institution for the purpose of SEVIS immigration transfer from College of DuPage to that institution. Only the information that I have checked below should be provided at this time.

**Check one:**

- VERIFY STATUS AND TRANSFER OUT my SEVIS record. I am including an admission letter from the transfer institution.
- VERIFY STATUS BUT DO NOT TRANSFER OUT my SEVIS record at the time. I am applying to several schools, and have NOT yet definitely decided to attend the institution indicated below.
- CANCEL MY PREVIOUS TRANSFER OUT REQUEST to the following institution. *(Please note that cancellations can only be processed by our office before the SEVIS release date.)*

**Name of Transfer Institution:** \_\_\_\_\_

**Location of Transfer Institution (City, State):** \_\_\_\_\_

**My last full-time term at College of DuPage will be:** \_\_\_\_\_

**Date when I expect to begin studies at the transfer institution:** \_\_\_\_\_

**Reason for transfer:** \_\_\_\_\_

**Name (printed):** \_\_\_\_\_

**Student ID Number:** \_\_\_\_\_

If you are having trouble submitting this form, save a copy to your computer and attach to an email to: [intlstdt@cod.edu](mailto:intlstdt@cod.edu)