



TRANSFER OUT REQUEST

This form must be completed by any F-1/J-1 student that has been accepted to another SEVIS certified school. An **official acceptance letter must** be submitted with this transfer out request form. The acceptance letter **MUST** be personalized to you, not a generic letter. For currently enrolled students, the release date must be at least 1 day after the end of the semester.

STUDENT INFORMATION

Student's Name: _____ ECU ID Number: _____

SEVIS ID Number: _____ (See top-right corner of your I-20 for ID#)

Last Date of Attendance at ECU: (mm/dd/yyyy) ____/____/____

Primary Email: _____ Home/Cell Phone: _____

Reason for transferring?

TRANSFER SCHOOL INFORMATION

Full Name of New School: _____

Are you attending a branch site? If so, what branch site will your SEVIS record be released to?

Address of school: _____

Phone Number: _____ Fax Number: _____

*****SEVIS SCHOOL CODE: _____** (Your new school will find the code on the first page of their I-20s, under Section 2)

***** (FORMS THAT DO NO INCLUDE THE SEVIS CODE FOR THE SCHOOL WILL NOT BE ACCEPTED)**

Requested Release Date: (mm/dd/yyyy) ____/____/____

It is my intent to transfer to the school below. I understand the following conditions of my transfer-out request. I can notify the ECU Office to cancel my transfer request prior to the release date only. As of the release date, ECU will no longer have access to my SEVIS record. As of the release date, I am no longer eligible for on-campus employment or the non-resident tuition waiver if I return to ECU in the future, and my current OPT/CPT will automatically cancel.

Student's Signature: _____ Date: (mm/dd/yyyy) ____/____/____

Return to:

ECU, Int'l Office, 1100 E. 14th St., Ada, OK, 74820, Email: intl@ecok.edu, Phone: 580-559-5669 Fax: 580-559-5755

FOR ECU ISPS OFFICE ONLY

Date Transfer Form Received: ____/____/____ Transfer completed on ____/____/____

DSO Signature _____