International Student Transfer-In Form

If you are on a student visa at another U.S. institution, your current international advisor will need to transfer your SEVIS record to Stephen F. Austin State University (F-1 School Code: HOU214F00221000).

PART I: To be completed by STUDENT – After you complete Part I, give this form AND your acceptance letter/email to your current International Student Advisor.

By signing below, I authorize my current International Student Advisor to provide the information below as part of my application for admission to Stephen F. Austin State University:

Name (Last, First): ______________________________ SFA ID#: ____________________________
Current U.S. Address: ___________________________ City, State: __________________________ Zip: ____________
Will you travel outside the U.S. before beginning your studies at SFA? Yes ____ No ____
If yes, you may need a new I-20 form from SFA. Departure date: __________ Return date: __________
If no, you will receive your new I-20 form upon arrival at SFA and after you have registered for classes.
Expiration date on current student visa: ________________
Signature: ___________________________ Expected Enrollment Semester: _________________ 20___

PART II: To be completed by current INTERNATIONAL STUDENT ADVISOR (P/DSO)

Student’s Current Immigration Status: F-1 _____ J-1 _____ Other _____ (Specify)
Is this student currently enrolled at your institution? Yes _____ No _____
If No, please give date of last attendance: ____________________________
Is this student in legal status and eligible to transfer pursuant to 8 CFR 214.2 (f)(8)? Yes _____ No _____
If No, please explain: __________________________________________________________________
Would the student be permitted to continue/return to your institution? Yes _____ No _____
If No, please explain: __________________________________________________________________
Was the student granted CPT or OPT while enrolled at your institution? Yes _____ No _____
If Yes, please specify dates: From: ___________ To: ___________

Student SEVIS # N-__________________________ RELEASE DATE: _________________________

Signature of School Official: ___________________________ Title: _____________________________
Printed Name: __________________ Name of Institution: ____________________________ Date: ________
Phone: ______________________ Email: ____________________________

SFA International Programs, PO Box 6152, Nacogdoches, TX 75962
936-468-6604

Please scan and return completed form to international@sfasu.edu