Transfer In Form – University of Nevada, Las Vegas

The student listed below has been admitted to the University of Nevada, Las Vegas. Immigration regulations require your confirmation that the student has been pursuing a full course of study at your institution before the student's transfer to UNLV can be approved. Please complete the following:

Office of International Students and Scholars
University of Nevada, Las Vegas
4505 Maryland Parkway – Box 451035
Las Vegas, NV 89154-1035
Phone: (702) 895-0143 FAX: (702) 895-0169

Print Student Name: _____SEVIS ID# N_____
First Name **Last Name**

This student attended our school from _____ to _____ (dates of attendance).
first date ***last date***

Circle visa status F-1 J-1 other_____

Current I-94 admission # _____ SEVIS ID # _____

What date will you enter into SEVIS as the "transfer release date"?: Month_____ Day _____ Year _____

********** Please select the transfer out school as "**University of Nevada, Las Vegas**" PHO214F1064300

Check all that are applicable:

_____ This student is considered to be in full-time status and is eligible to transfer without leaving the U.S. or going to USCIS.
_____ This student is out of status and we will/have advised this student to apply for reinstatement upon receipt of the new I-20 from UNLV.
_____ This student's current status is unknown. *****Please clarify in "Comments" below
_____ This student received off-campus work authorization for :
_____ **FULL-TIME Curricular** Practical Training from:_____to _____
_____ **OPTIONAL** Practical Training (indicate part-time or full-time) from _____ to _____

*****Comments:_____
_____
_____

_____|_____
Name and Title of DSO *Signature*

_____|_____|_____
Name of Institution *Telephone #* *Fax #*

_____|_____
Address *City, State, and Zip*

_____|_____|_____
Date *SEVIS School Code* *E-mail address*

FOR UNLV ISS OFFICE USE ONLY

SEVIS updated on _____ By_____ with transfer release date of _____