NOTRE DAME DE NAMUR UNIVERSITY

SEVIS I-20 TRANSFER IN FORM

Complete this form only if: 1) you are transferring from another institution in the U.S.; 2) you have received an admission letter from Notre Dame de Namur University (NDNU); and 3) you want an I-20 from NDNU.

Transfer Procedures:
1. Complete Section 1 of this form.
2. Contact the International Student office at your current school and determine an appropriate "release date" for your transfer. The release date must be:
   - Within 5 months of your last date of enrollment and NDNU's program start date,
   - No later than 60 days after the completion of your studies or OPT at your current school, or
   - For new Initial students, must be within 30 days of arrival in the United States,
   - And no later than within the first 15 days of the semester.
3. Have an international student advisor at your current school complete section 2 of this form and email NDNU's international admissions PDSO (**iadmissions@ndnu.edu**) (**SEVIS SCHOOL CODE: SFR214F00612000**).

Section 1 *Student should complete the section below.*

Name: _____   _____   _____
(Family/surname as it appears in passport)   (First/Given name)   (Middle Name)

Date of Birth (mm/dd/yy): _____   **Phone Number:** _____

Foreign permanent address: _____

Current U.S. address: _____

Will you leave before starting at NDNU? ☐ Yes ☐ No If Yes, what are your travel dates: _____

Do you have any dependents (F-2) that will come with you to NDNU? ☐ Yes ☐ No

Section 2 **International Student Advisor (DSO) should complete the section below.**

To the best of your knowledge, is this student in valid F-1 status and eligible for transfer?	☐ Yes	☐ No
Is the student out-of-status and been advised to discuss reinstatement procedure with NDNU?	☐ Yes	☐ No
Has the student been authorized for a reduced course load in SEVIS?	☐ Yes	☐ No

If yes, please indicate reason: ☐ Academic ☐ Last Semester ☐ Medical Number of semesters/quarters: _____

Has the student been authorized for Practical Training?	☐ Yes	☐ No

If yes, please indicate: ☐ CPT ☐ OPT Program Level: _____ Dates: _____

What is the student's last day of enrollment (or OPT) at our school? _____

Student's SEVIS ID Number: _____   **Transfer release date:** _____

International Student Advisor's Name (print): _____

Signature: _____   **Date:** _____

Phone: _____   **Email:** _____

School Name and Location: _____