

Transfer "In" Request

All students currently in F-1 status at any type of institution (high school, college, university, intensive English institute) in the U.S. who plan to transfer to Kansas State University must complete the transfer procedure through SEVIS. Complete this form and return by fax or mail to the International Student and Scholar Services at Kansas State University.

Transfer Procedure:

1. Receive admission to Kansas State University
2. Notify your current school of your intentions to transfer.
3. Complete Part I of this form (only after you have been admitted and choose to attend K-State)
4. Have an international student advisor at your current institution completed Part II.
5. After you and your current school have determined the date to have your SEVIS record electronically released to K-State, promptly return this form.
6. After the release date, K-State will produce an I-20. **Contact our office to make arrangements to receive your new I-20.**

Part I: To be completed by the student

Please complete Part I of the form, sign and submit to the international student office at your school.

Name: _____
Family Given Middle

Semester you intend to begin classes at K-State: Fall Spring Summer of _____
year

Will you travel outside of the U.S. between attendance at the two schools? Yes No

If yes, please provide your travel dates and consult your current advisor to determine if it is best to delay your release date until after your return.

Expected Departure Date: _____ Expected Return Date: _____

I authorize my current institution to provide the information requested in Part II of this form to the International Student and Scholar Services at Kansas State University.

Student Signature: _____ Date: _____

Part II: To be completed by International Student Advisor

Has the student maintained valid F-1 status while attending your institution? Yes No

If no, please explain: _____

Did the student receive approval for a reduced course load? Yes No

If yes, for what reason(s): _____

Did the student receive any practical training? Yes No

If yes, state the type, whether authorization was full-time or part-time and the program level and dates

Release Date: _____

Release record to **Kansas State University**
KAN214F00272000

Printed Name _____

Signature _____

Title _____

Date _____

Name of School _____

Phone Number _____ Fax Number _____

Address of School _____

E-mail _____

International Student & Scholar Services
104 International Student Center, Kansas State University
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