



SEVIS TRANSFER FORM

TO THE INTERNATIONAL STUDENT: Please complete the information in Section I and submit this form to the International Student Advisor at your present/last school attended.

TO THE DSO/INTERNATIONAL STUDENT ADVISOR: U.S. Citizenship and Immigration Services (USCIS) requires international students who wish to transfer to another SEVP-certified school to be updated as such in SEVIS. The purpose of this form is to assist our office in ensuring a smooth SEVIS transfer process for the following international student. Please complete section II and return this form to Metropolitan State University of Denver.

Section I (to be completed by student)

_____	_____	_____	_____
Last Name	First Name	Middle Name	SEVIS ID Number
_____	____/____/____	_____	_____
Country of Citizenship	Date of Birth (mm/dd/yy)	Phone Number	
Intended Transfer Term	<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Summer Year _____
I hereby authorize the International Student Advisor (or equivalent campus official) to provide the information below as part of my request to transfer to Metropolitan State University of Denver.			
Signature: _____		Date: _____	

Section II (to be completed by International Student Advisor)

Please return form to: Metropolitan State University of Denver International Admissions EMAIL: intladmissions@msudenver.edu MSU Denver SEVIS Code: DEN214F00203000		
SEVIS release date: _____	SEVIS ID: _____	
Please check and complete all that apply:		
<input type="checkbox"/>	This student is in good standing and is/was enrolled in a full course of study until (date) _____	
<input type="checkbox"/>	This student graduated (term & year) _____	
<input type="checkbox"/>	This student is in Optional Practical Training: beginning date _____ ending date _____	
<input type="checkbox"/>	This student is out of status. A reinstatement to student status was filed on (date) _____ with USCIS in (place) _____, and is pending. Please enclose copies of documents filed with USCIS.	
<input type="checkbox"/>	This student is out of status and must file for reinstatement to student status. Please explain in comments. _____ DOS error _____ student error	
Other Comments: _____		

_____	_____	
DSO Signature	Name of DSO	
_____	_____	_____
Title of DSO	School Name	Date
_____	_____	_____
School Address	Email Address	Telephone Number