

The University of Akron
School Code: CLE214F00500000

F-1 Student Transfer-In Form

(For F-1 students accepted to UA and transferring their I-20 from current U.S. institution to UA)

SECTION 1. Personal Information *(To be completed by the student)*

Name (LAST, First, Middle)

Date of Birth (MM/DD/YYYY)

UA ID# (if known)

Your Current Mailing Address

Current Phone Number

E-mail Address

School you are now attending (or the one most recently attended)

Do you intend to leave the U.S. prior to attending The University of Akron? (Yes/No)

Authorization: ***I authorize my current international advisor to verify the above information and provide the information requested in Part 2***

Student Signature

SECTION 2. Advisor's Report *(to be completed by the international student advisor)*

1. SEVIS ID#: _____

2. The release date for transfer out: _____

3. Last semester of enrollment at your institution: _____ Full-time? Yes No

If "NO", please explain: _____

4. Please mark the appropriate box:

- The student is in good standing and pursuing a full course of study, eligible for transfer.
- The student is on post-completion Optional Practical Training.
- The student is out of status; application for reinstatement was filed on _____ and is pending.
- The student is out of status; application for reinstatement has not been filed.
- Other: _____

5. Employment/Training

The student has participated in Curricular Practical Training:

Program _____ Beginning date _____ Ending date _____

The student has participated in Optional Practical Training:

Program _____ Beginning date _____ Ending date _____

6. Additional Comments:

DSO's Signature _____ Name & Title _____ Date _____

University Name _____ Address _____

Phone Number _____ E-mail address _____

Thank you!

Please send the completed form by mail or fax to:

Immigration Services
The International Center
The University of Akron
Akron, OH 44325-4724
FAX: 330-972-8824