



REQUEST FOR RELEASE OF SEVIS RECORD FOR TRANSFER OUT PROCEDURE

All students in F-1 (Student) status will have only one record in the Student and Exchange Visitor Information System (SEVIS). Only one school at a time can access a student’s record. If you wish to leave Edison State and transfer to another school/academic institution, you must complete this form, which officially informs us of your intent and allows us to update your SEVIS record for release to your new school. Please be informed and/or reminded of the following:

- Though you may have applied to several schools, a Designated School Official (DSO) can specify **only ONE school** to which you plan to transfer.
- A DSO will (1) **update your record in SEVIS for a “Transfer out”**, (2) **specify name of transfer school** you indicate below, and (3) **specify a transfer release date**.
- The DSO will use the end date of current semester/term at Edison as your transfer release date. Your new school will not be able to issue you a SEVIS I-20 until the transfer release date.
- If you decide to continue at Edison State and not transfer out, you must notify the Office of the Registrar **BEFORE** the transfer release date. Edison State will not have any access to your record once the transfer date is reached.
- This procedure is only for release of your SEVIS record to transfer out to a new institution. You must still complete a School Transfer procedure at your new school within 15 days from the end of registration for your initial term there.

Please PRINT all information requested.

Last Name First Name Date of Birth(Month/Day/Yr)

SEVIS #: N_____ Edison ID#: _____

TRANSFER School Name (and Designated Campus, if applicable):_____

School Address: _____

City:_____ State:_____ Zip Code:_____

Phone Number _____ Fax Number _____

Initial Term at new school:_____ Start Date (Month/Day/Yr):_____

Last date of enrollment at Edison:_____

Please read and sign: I authorize Billee Silva to update my SEVIS record to initiate a transfer out procedure and release my record to the above-named school by the Edison semester/term end date requested above. I am aware that should I change my mind, I must notify Mrs. Silva before the transfer release date to cancel the transfer. I attest that the information provided above and documented, as applicable, is true and valid.

SIGNATURE

DATE

FOR COLLEGE USE ONLY:

SEVIS updated on _____ by _____ Transfer release date _____
(Month/Day/Year) (DSO) (Month/Day/Year)