

## F-1 SEVIS TRANSFER-OUT REQUEST

\*This request requires an appointment for submission\*

Last Name:  UCLA ID#:  Email:		First Nar	SEVIS ID#: N			
		SEVIS ID				
		Telephor				
UCLA Degree Objective:	Bachelor's	Master's	Doctorate	Other		
SEVIS TRANSFER OUT RE	QUEST CHECKLIST					
□ Completed SEVIS Tr	ansfer-Out form (all ite	ems must be filled in)	).			
□ Print out of admission	n letter to new school	that lists the start terr	n or date.			
NEW SCHOOL INFORMATION	<u>ON</u>					
School Name:						
Address:						
(Street Address						
(City)	(City)		(State)		(Zip Code)	
School SEVIS Code:	214F					
Last enrollment term at UC	LA:					
Are you currently on OPT or STEM OPT Extension?  • If yes, when is your last date of employment (MM/DD/YY)				Yes	No	
If on STEM OPT Extens.				ation on Student P	rogress"	
SEVIS RELEASE DATE (MN	•					
<ul><li>Date your SEVIS record</li><li>This date must be later t</li></ul>			employment if on OF	PT or STEM OPT I	- - - - - - - - - - - - - - - - - - -	
This date must be later t	nan inc last date of ci	TO THOU TO THE ACT OF	employment ii on or	TOTOTENTOTTE	-XICHSIOH.	
I am aware that after the rel by UCLA, and I cannot trave the best of my knowledge.						
Student's Signature:	t's Signature:		Date:			
FOR OFFICE USE ONLY	INIT:	DATE	=:			
	□ Restriction Hold	ls □ Current Enroll	ment □ Past Enro	ollment □ Curre	ent I-20	