



Southwest Texas Junior College

SEVIS TRANSFER FORM

To the International Student: Please complete the information in Section 1 and submit this form to the International Student Advisor at your present/last school attended.

To the DSO/International Student Advisor: The Bureau of Citizenship and Immigration Services (BCIS-formerly INS) requires International students who wish to transfer to another approved school to be updated as such in SEVIS (Student Exchange Visitor Information System). Please complete this form to ensure a smooth SEVIS transfer and **mail or fax this form to Southwest Texas Junior College, Attention: International Student Advisor**. School codes are as follows: Uvalde Campus - SNA214F00046000; Eagle Pass Campus - SNA214F00046001; Del Rio Campus - SNA214F00046002

SECTION 1 (to be completed by the student)

Last Name: _____ First Name: _____ Middle Name: _____
I-94# _____ Country of Citizenship: _____ Date of Birth: _____
SSN: _____ E-Mail: _____ Phone# _____
Address: _____
Address: _____
City/Province: _____ State: _____ Country: _____ Zip Code: _____

I hereby authorize the International Student Advisor (or equivalent campus official) to provide the information below as part of my application for admission to Southwest Texas Junior College.

Student's Signature Date

SECTION 2 (to be completed by the DSO/International Student Advisor)

SEVIS release date: _____ SEVIS Number: _____

Please Check and complete all that apply:

- This student is in good standing and is/was enrolled in a full course of study until (date): _____
- This student is out of status and a reinstatement to student was filled on (date) _____ with the BCIS in (place) _____, and is pending. Please enclose copies of any document filed.
- This student is out of status and must file for reinstatement. Please attach explanation.
- This student is in Optional Practical Training. Beginning date: _____, ending date: _____
- This student has previously been granted Practical Training: please specify type(s) and date(s): _____

Other comments: _____

DSO Signature Date Name of DSO (Print) DSO Phone Number

School Name and Address: