

**SEVIS Transfer Out Request
Form
- for International Students -**



Mailing address: Clayton State University
International Student Services (ISS)
2000 Clayton State Boulevard
UC 204
Morrow, GA 30260

Contact: Tel: 678-466-4090
Fax: 678-466-5469
Email:
ISS@clayton.edu

USING THIS FORM BEFORE YOU RECEIVE A FINAL ACCEPTANCE LETTER COULD PUT YOUR STATUS AT RISK.

To Student: Complete **section I and II**. Next, send this form along with your acceptance letter from your new school to the Clayton State International Student Services.

Section I - to be completed by the student

First Name: _____ Last Name: _____
Birthday (MM/DD/YYYY): _____ Clayton State ID#: _____
Clayton State email address: _____

I grant permission for my SEVIS record transfer requested below to be released by Clayton State University.

Student Signature: _____ Date (MM/DD/YYYY): _____

Section II – to be completed by the student

Transferring Out School Name: _____
Campus Location: _____
Are you currently on OPT? Yes No

An International Office advisor will determine the appropriate release date which will generally be the last day of your current semester. If you have any special circumstances and would like to request a specific SEVIS release date fill out the information below.

Important considerations for the transfer release date:

- If a student completes a course of study (or OPT), the student is eligible for transfer through the end of the 60-day grace period.
- If you are planning on traveling abroad you must re-enter the country with the I-20 from the school that holds your SEVIS record at the time. If your release date occurs when you are abroad the international office at your new school will have to mail you the transfer I-20.

SEVIS record release date request (MM/DD/YYYY): _____

Student Name (Print): _____

Signature: _____

Telephone # with area code: _____

Email address: _____