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**F-1/J-1 TRANSFER REQUEST FORM FOR INTERNATIONAL STUDENTS & SCHOLARS**

**A. Student/Scholar Information Section**

F-1 or J-1 international students/scholars who are transferring to the University of Richmond (SEVIS School Code WAS214F10016000/Program Number P-1-03203) need to complete this form in addition to the I-20/DS-2019 Authorization Form. Please sign the release of information statement below and give this form to the international student/scholar advisor at the school or program you now attend or most recently attended.

#### I grant permission for the information requested below to be released to University of Richmond. Yes No Name: Family Name, Given Name Middle Initial

Signature: Date: MM/DD/YYYY

*For F-1 visa holders only:* Academic Term of last attendance at educational institution (ex: Fall 2005):

I-20/DS-2019 Requested Transfer Date to Richmond from current institution/program: MM/DD/YYYY

**Mailing Address – where you would like your new I-20/DS-2019 sent:**

Street 1:

Street 2:       Telephone #:

City:       ZIP/Postal Code:       Country:

**B. Designated School Official/Responsible Officer Section**

The above-named international student/scholar has qualified academically for admission or program participation to the University of Richmond. In compliance with immigration regulations, we request confirmation of his/her status in your institution/program before approving transfer to this school.

**Please complete the following information:**   F-1 student  J-1 exchange visitor (category

End Date on I-20/DS-2019: MM/DD/YYYY Name of Institution/Program Sponsor: Enter Institution/Program Sponsor

SEVIS School Code/Program Number: Enter SEVIS School Code/Program Number

The student/scholar is in good standing and is pursuing a full course of study or fulfilling their program objectives (or has already been reinstated to status by USCIS/U.S. Department of State).

The student/scholar is out of status and a reinstatement to status was filed on MM/DD/YYYY with USCIS Service Center/U.S. Department of State and is pending. (Please attach a copy of the filing.)

The student/scholar is out of status, and we will advise them to apply for reinstatement upon receipt of a new I-20/DS-2019 from University of Richmond.

Other – Please explain:

Please indicate the start and end dates of any practical/academic training:

CPT  OPT  J-1 Academic Training Start Date: MM/DD/YYYY End Date: MM/DD/YYYY

Name and Title of Designated School Official/Responsible Officer Completing this Form

Name & Address of Institution City, ST Zip code

Telephone (     )       Fax (     )       Email Address

Signature: Signature Date: MM/DD/YYYY

**PLEASE RETURN THIS FORM BY EMAIL TO** [**konsanit@richmond.edu**](mailto:konsanit@richmond.edu)**.**

**Krittika Onsanit, Director of International Student, Scholar & Internship Services**

**Office of International Education, 211 Richmond Way, University of Richmond, VA 23173**

**FAX: 1 (804) 289-8904 TELEPHONE: 1 (804) 287-6499**