



**INTERNATIONAL AFFAIRS**

**Request for F-1 Transfer Information Form**

All F-1 student applicants transferring from a U.S. institution to Gallaudet University must complete this form. As part of the admissions process, your F-1 visa status must be verified with your current institution. Complete Section I and give this form to your international student advisor at your current or previous institution, along with a copy of your admission letter from Gallaudet University.

The form must include a specific release date in order to transfer your Form I-20; we cannot issue your new Form I-20 until your SEVIS record has been released from your current/former institution to Gallaudet University verifying your status. The form will remain incomplete without it. It is recommended you do not plan your travel to Gallaudet until you have received our new Form I-20 as you may not be allowed to reenter the U.S. on your old Form I-20.

If you are currently out of status, Gallaudet University will issue you an initial Form I-20. You will be required to pay the SEVIS fee related to the new Form I-20. It is recommended you return to your country of residence and then reenter the U.S. on the new Form I-20. If your old visa has expired, you may also be required to apply for a new F-1 visa.

Please note that all authorized employment at your current/previous institution and/or any remaining Optional Practical Training employment authorization based on your current/previous degree program will end once your SEVIS record has been released to Gallaudet University.

**PART I: To Be Completed By Student**

NAME: \_\_\_\_\_  
*Last Name (Family Name) First Name Middle*

GENDER: (Check one):  Male  Female DATE OF BIRTH: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Month Day Year*

Semester you plan to enter Gallaudet:

Summer Semester \_\_\_\_\_  
*Year*

Fall Semester \_\_\_\_\_  
*Year*

Spring Semester \_\_\_\_\_  
*Year*

In accordance with the United States Citizenship and Immigration Services (USCIS) regulations regarding transfer to schools, I authorize the information requested in Part II below to be released to my SEVIS record.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PART II: To Be Completed By the Designated School Official (DSO)**

The student named above has indicated his/her intention to transfer to Gallaudet University. Please complete this form and attach a copy of the student’s current Form I-20, passport, and visa documentation. Return it to the address above. The Gallaudet University school code is **WAS214F00059000**.

- The student is/was in lawful F-1 status according to USCIS regulations at this school.
- The student is/was not in lawful F-1 status according to USCIS regulations and my records because:  
\_\_\_\_\_

Has the student met all the financial obligations?  Yes  No

The student is currently enrolled or was last enrolled in the \_\_\_\_\_ semester.

If the student is not currently enrolled, has reinstatement application been filed?  Yes  No

- The student has been authorized the following Practical Training benefits:
- Optional: Full-time: \_\_\_\_ months \_\_\_\_ days Part-time: \_\_\_\_ months \_\_\_\_ days
  - Curricular: Full-time: \_\_\_\_ months \_\_\_\_ days Part-time: \_\_\_\_ months \_\_\_\_ days

The student has been previously authorized for medical reduced course load:

- Date of authorization: \_\_\_\_\_

Student’s SEVIS ID #: \_\_\_\_\_ SEVIS Transfer Release Date: \_\_\_\_\_

Name of DSO/Title: \_\_\_\_\_

Institution: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Signature of DSO: \_\_\_\_\_ Date: \_\_\_\_\_

**Please stamp this form with the seal of your institution.**

**Return the completed form to:** Gallaudet University  
 International Affairs  
 International Student and Scholar Services  
 800 Florida Avenue NE, Dawes House  
 Washington, DC 20002-3695 USA

**Attn: Mona Blanchette McCubbin, PDSO**