



SEVIS TRANSFER I-20 ELIGIBILITY FORM

To complete your SEVIS Transfer I-20 Request, scan and e-mail this completed form to iss@umw.edu.

1. Complete Section A.
2. Give this form to a Designated School Official (DSO) at your current school, who will complete Section B, update your SEVIS record to indicate your intent to transfer to UMW, and enter a "transfer release date." On that date, your SEVIS record will become accessible to UMW.
3. Return the fully completed form to UMW, along with the following documents:
 - Include proof of funding
 - Copy of your passport "photo page(s)", including page showing expiration date
 - Copy of your current (most recently issued) visa
 - Copy of your current Form I-94 (<https://i94.cbp.dhs.gov/I94/request>)
 - Copy of your current Form I-20 and all Forms I-20 issued to you previously
4. Attend the mandatory International Student Orientation to complete the F-1 transfer process. Bring your passport and all of your other immigration and travel documents with you to Orientation.

SECTION A – TO BE COMPLETED BY YOU: I request and authorize the school named below to complete section B of this form and release my SEVIS record to the University of Mary Washington (**SEVIS School code: WAS214F10062000**)

Name: _____ **Date of Birth:** _____

Email: _____ **Phone:** _____

Name of School: _____

Signature: _____ **Date:** _____

SECTION B – TO BE COMPLETED BY DESIGNATED SCHOOL OFFICIAL

This form may be returned to the student or mailed directly to UMW at the address below.

SEVIS Information:

Student's SEVIS Identification Number: _____

Student's SEVIS Transfer Release Date: _____

Eligibility for F-1 transfer:

I confirm that, to the best of my knowledge, the student named above has continually maintained F-1 status, has been enrolled in a full course of study, and is eligible for an F-1 transfer.

I confirm that, to the best of my knowledge, the student named above is ineligible for an F-1 transfer for the following reason: _____

DSO Signature: _____ **Date:** _____

Name and Title: _____

Email: _____

Phone: _____ **Fax:** _____

Return completed form to:
Center for International Education
1301 College Avenue
Lee Hall 434
Fredericksburg, VA 22401
iss@umw.edu
Fax: 540-654-1119