

## F-1 Student Transfer Eligibility Form

To transfer to Florida Southwestern State College (FSW) from another school, you will be required to submit an online application, transcripts, test scores, proof of finances, and other related admissions documents before being accepted and issued an I-20 from FSW. Contact a Designated School Official (DSO) at FSW for details on the admission process.

After you have provided all required documents and been admitted to FSW, contact the international student advisor at your current school, provide a copy of your FSW acceptance letter and decide on a "release date" which your current school's international advisor will enter in to the SEVIS database. Please discuss interim travel or work plans with your international advisor at your current school as that may affect your transfer procedure. Florida Southwestern State College Office of Admissions will not be able to produce an I-20 until after the SEVIS release date from your current school, which is the date you will complete attendance at that location. It may still take several days to issue I-20 following the release date.

To complete an F-1 transfer form to Florida Southwestern State College, you must do the following:

- 1. Complete "Student Information Section" below.
- 2. Notify the school you are currently attending of your intent to transfer to Florida Southwestern State College. A Designated School Official (DSO) at your current school will need to complete the "Academic Institution Section" that follows on page two.

<u>Student Information Section</u> – I request and authorize the DSO at the school named on the "Academic Institution Section" of this form to provide the requested admissions information to FSW.

## Student Name (as it appears on passport):

		/		/					
Last name		First name		Middle r	name				
Physical Addres	5:								
-	Street			City		State	Zip		
Email address: _			Ph	Phone Number:					
Degree Level yo	ou intend to	pursue at FSW: 🗆	Associate	(AA, AS)	🗆 Bac	helor (BS,	BAS)		
Program (i.e. gei	neral studies	s, nursing, supervisio	on & manag	ement, et	c.):		_		
Intended Start Date at FSW: Year				and Semester (checked below)					
	st)								
I plan to take cla	sses at the f	ollowing FSW Camp	us:						
	Lee County (	Campus in Fort Mye	rs – MIA214	F0096500	0				
	Charlotte Co	ounty Campus in Pur	nta Gorda –	MIA214F0	0965001				
	Collier Coun	ty Campus in Naples	s – MIA214F	00965002					
		les Center in Labelle							
Student Signatu	re:				Date:				

<u>Academic Institution Section</u> – To be completed by the International Student Advisor/Designated School Official (DSO):

The student named on page one of this form has indicated intent to transfer to Florida Southwestern State College at the location checked. Please certify the information below, so that FSW can verify the student's eligibility for the F-1 school transfer. Return the completed form via email to the FSW Admissions Office at <u>internationalstudent@fsw.edu</u>.

Studer	nt Name:	SEVIS ID Nur	_ SEVIS ID Number:									
1.	. Student's I-94 admission number:											
2.	Date of initial or last entry into the United States:											
3.	Type of visa at entry:											
4.	What is the completion date in Section 5 of the current I-20?											
5.	For which term was the student last enrolled full time at your institution?											
6.	Is the student currently on an annual vacation	? (circle one)	Yes	or	No							
7.	Has the student ever been granted any kind of practical training: (circle one) <b>Yes</b> or <b>No</b> If yes, state what kind and duration:											
8.	. What is the SEVIS Release date from your school?											
	pendent Information: Name (print Family Name	· · ·										
Eligibil	ity for F-1 Transfer: onfirm that, to the best of my knowledge, the st tatus, has been enrolled in a full course of study dicated in the student section.	udent named abo	ve has	continua	ally mair	ntained F-						
	onfirm that, to the best of my knowledge, the standard insfer for the following reason:			eligible f	or an F-	1						
DSO Si	gnature:	Da	Date:									
Name	and Title of DSO (please print):											
School	Name:											
Addres	ss:Tel	lephone:		Email								