



Center for International Education
605 Washington Street
PO Box 1857
Fayette, IA 52142
Phone: +1 (563) 425-5852
Fax: +1 (563) 425-5833
E-mail: international@uiu.edu
Web: www.uiu.edu

SEVIS RECORD TRANSFER OUT FORM

In order to transfer your SEVIS record to another school within the United States, please complete the following steps:

1. Complete this form in its entirety.
2. Attach a copy of your admission letter to your new school.

Important notes

- If you are currently on OPT, your employment authorization will end on the date your record is transferred to the new school.
- Your SEVIS record must be transferred to the new school within 60 days of the last date of study at UIU.
- If you are transferring without attending Upper Iowa University, you must transfer within 30 days of the beginning date of your Form I-20. Also, you must send a copy of each of the following documents: visa, passport, both sides of your I-94 card and Form I-20, as well as a current address in the United States.
- You must begin your studies at the next possible start date at the new school. Your break cannot be longer than 5 months.
- Upon receipt of the documents above, we will transfer your SEVIS record to the new school, which will issue you a new Form I-20. You do not need to repay the SEVIS fee.
- Once your record is transferred to your new school it is very difficult to reverse the transfer.

If you have any questions, please contact the Center for International Education at international@uiu.edu, or via phone, at (563) 425-5852.

When ready, please submit all paperwork to:

Center for International Education
Upper Iowa University
605 Washington Street
Fayette, IA 52142

Fax: (563) 425-5833
Email: international@uiu.edu



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Part I: Upper Iowa University School Information

Name: _____

UIU Student ID: _____

SEVIS ID: _____

E-mail: _____

Phone: _____

Last Term to be Enrolled at UIU: _____ (*i.e. Spring 2010, Fall 2011, etc.*)

Last Date to be Enrolled at UIU: _____ (MM/DD/YYYY)

Part II: New School Information

Name of New School: _____

Address of New School: _____

Name of Contact Person at New School: _____

E-mail of Contact Person at New School: _____

Phone of Contact Person at New School: _____

SEVIS School Code of New School: _____

Beginning Date of Classes at New School: _____ (MM/DD/YYYY)

When Would You Like Us To Transfer Your SEVIS File? _____ (MM/DD/YYYY)

I hereby authorize Upper Iowa University to transfer my SEVIS record to the school listed above.

Student's Signature: _____

Date: _____ (MM/DD/YYYY)

FOR CIE OFFICE USE ONLY

Received by: _____

Date: _____