



## International Student Transfer Form

Only F1 students who have been attending school in the U.S. are required to submit this form. No applicant's request to transfer is complete until this completed form and a photocopy of the student's current Form I-20 are received by the Center for English Language and American Culture's (CELAC) office.

### For Transferring International Student:

Please complete the top part of this form, sign, and give to your current immigration official.

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Current U.S. Mailing Address: \_\_\_\_\_

U.S. Phone Number: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Permanent Foreign Address: \_\_\_\_\_

Social Security Number (if applicable): \_\_\_\_\_

\_\_\_\_\_

I plan to attend CELAC for the following semester:

I would like my new I-20 to be sent to:

☐ Fall ☐ Spring ☐ Summer

☐ My U.S. mailing address as listed above

Do you plan to leave the U.S. before starting school at

Please allow for 1-2 weeks for mailing to arrive

CELAC? ☐ Yes ☐ No If yes, when is your departure date

☐ If urgent, FedEx overnight to current U.S. address

from the U.S.? \_\_\_\_\_

☐ My permanent foreign address

☐ Hold it at UNM and I will pick it up

I grant permission for the requested information to be sent to CELAC.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### For Designated School Official (DSO):

The student named above is applying for admission to the Center for English Language & American Culture (CELAC) at the University of New Mexico. Please complete this form and fax to (505) 277-1867 or scan and email to [celac@unm.edu](mailto:celac@unm.edu). If you have any questions, please call us at (505) 277-7540. Thank you for your assistance!

Student's last date of attendance: \_\_\_\_\_

Student's SEVIS ID Number: \_\_\_\_\_

Student's current immigration status: \_\_\_\_\_

Release date in SEVIS: \_\_\_\_\_

I-20 expiration date: \_\_\_\_\_

School code: ELP214F0020500 University of New Mexico

Was the student in status while attending your school?

Did your institution issue the original I-20?

☐ Yes ☐ No

☐ Yes ☐ No

If not, has the student applied for reinstatement?

☐ Yes ☐ No

☐ Please send us a copy of Acceptance Letter via: \_\_\_\_\_

☐ Please confirm acceptance via: \_\_\_\_\_

DSO Name: \_\_\_\_\_ DSO Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Institution name: \_\_\_\_\_ Address: \_\_\_\_\_

DSO email: \_\_\_\_\_ Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_