

Part I. Information about the Transferring F-1 Student				
1.	Family Name:	First Name:		Middle Name:
2.	U.S. Address:			
3.	Email:	4. Phone:	4	5. Dautage #:
6.	Date of Birth:	7. SEVIS ID #: N00		8. SEVIS Release Date:
Part II. Contact Information of your Current University (Transfer-out university)				
9.	Name of the University: 10. Location of the		10. Location of the Ur	niversity:
11.	Name of the DSO:		12. Email Address of the DSO:	
Part III. Other Information				
13. Term of Admission at Southern Illinois University (SIU): ☐ Fall; ☐ Spring; ☐ Summer, Year 20). Note: You must begin your program at SIU within 5 months of completing your program at your current school or within 5 months of your transfer release date, whichever is earlier. If you are offered employment, such as TA or RA at SIU, you cannot start to work until your SEVIS Record Release Date. If you are on OPT or STEM OPT, your OPT authorization will also end on this date.				
14. Please inform the international office of your current school that Southern Illinois University's SEVP Campus Code: For Carbondale campus in Carbondale: CHI214F01061000 For School of Medicine in Springfield: CHI214F01061001 For Transportation Education Center in Murphysboro: CHI214F01061002				
15. If you plan to travel outside the U.S. before beginning study at SIU, provide the date of Travel: and mailing address during the traveling.Note: You must use the I-20 issued by SIU to re-enter the US between attendance at your current school and SIU.				
Student's Signature:			·	Date:

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