



Office of International Students & Scholars
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Transfer OUT Form for F-1 Students

Last Name _____ **First** _____ **Middle** _____

Perm Number: _____

Period of Stay at UCSB: FROM _____ **TO** _____

Transferring to (Name of School): _____

Date You Want To Be Released in SEVIS To Your New School: _____

Any Practical Training Authorization?*: FROM _____ **TO** _____

**If you are on Optional Practical Training, the date you asked to be released in SEVIS will be the date your Employment Authorization ENDS. Please attach / FAX a copy of your EAD card.*

Reason for Transfer: _____

Signature: _____ **Date:** _____

Phone Number: _____ **Email Address:** _____

***** You will have to provide us with a copy of your letter of admission to your new school along with this signed form in order for us to transfer you to the new school.**

FOR OISS USE:

UCSB SEVIS ID#: _____ **DATE RELEASED IN SEVIS:** _____